

What is the Role of Professional Helping Relationships in Altering the Trajectories of Young People Facing Severe and Multiple Disadvantage?

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Preface

- This thesis is the result of my own work and includes nothing which is the outcome of work done in collaboration except as declared in the Preface and specified in the text.
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What is the role of professional helping relationships in altering the trajectories of young people facing severe and multiple disadvantage?

Rebeca Denisa Sandu

This doctoral thesis is about the possibility that relationships between young people facing severe and multiple disadvantage and professional helpers— employed by not-for-profit organisations— can alter the life trajectories of the young people.

Specifically, the research explored five sub-questions relating to the characteristics of the youth population, the nature of positive worker-young person relationships, the mechanism by which relationship alter young people's trajectories, the qualities of workers who support young people in this context, and the impact of such relationships on the young people's outcomes.

Two data sets were used to address these questions. The first four questions were explored through qualitative research involving 30 young people and 35 workers employed by not-for-profit organisations (five in the U.S. and 11 in the U.K.) selected on the basis of their ability to relate to young people in difficult circumstances. Participants were interviewed about their relationships and the findings were analysed using thematic analyses. The fifth question was explored through secondary analysis of data from a Canadian randomised controlled trial of *At Home/Chez Soi*, a programme commonly known as Housing First, aimed at people facing severe and multiple disadvantage. In this sub-study, a mixed method design was employed.

The findings shed light on the group characteristics that are fundamental to understanding their life trajectories, particularly highlighting the role of emotions (e.g., shame and feelings of unworthiness) in disconnecting young people from sources of support. This study revealed the family-like nature of such relationships and the workers' use of personal rather than professional ethics to allow for the formation of such deep bonds. The research described a mechanism of change by which the helper-helped relationships exerted their influence via alterations of the young people's emotions, cognition, and agency. The qualities of workers able to relate to young people in this context were found to map onto that mechanism. Evidence and possible reasons for the differential impact of relationships on the trajectories of people facing severe and multiple were described in the fifth paper.

These findings have implications for developing a public policy response to young people facing severe and multiple disadvantage.

Reading Guidance

This PhD thesis is written in “paper” format. There are five core research papers, each either published or under review in research journals. The five core research papers are sandwiched between an Introduction and Discussion.

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Introduction

This series of papers contribute to a study of young people facing severe and multiple challenges to their health and development. It explores how and why a relationship with an adult working for a non-governmental organisation influences the progress of the young people.

I came to this study with a training in psychology, and subsequently in the way attachment between mother and child contributes towards child outcomes. I was then employed by a research centre known for the study of interventions designed to improve the well-being of children from zero to 24 years of age.

I was asked to participate not in an orthodox research study but in an inquiry designed to help a foundation to make better use of its resources. The focus of the work was on young people aged 16-24 facing severe and multiple disadvantage, typically those with poor mental health, misusing drugs and/or alcohol, intermittently homeless, and largely disconnected from family.

The inquiry involved working with 36 young people supported by seven non-governmental organisations in England and Scotland. The research team built a relationship with them over a two-year period. We then worked with the young people to build a definition of severe and multiple disadvantage, a series of propositions for how best to respond to this disadvantage, and proposals for how foundations and public systems could better support innovation and policy development. The young people's ideas were validated by a group of 100 other experts, who met at two monthly intervals to consider the propositions. The work was written up in a book that I co-authored called *Bringing Everything I Am into One Place* (Little, Sandu, & Truesdale, 2015).

One of the main findings from the work was the value the young people placed on the quality of the relationships with those charged with supporting them. Two things, in particular, left a mark on me and motivated me to find out more. One, they described the experience of being matched to a support worker as akin to playing the lottery, "If you are lucky, you get a good one." Two, the young people were able to define what they meant by a positive relationship and the quality of practitioners able to sustain such a relationship. They used the heuristic 3H to refer to *head* — someone who can help me with my future plans; *heart* — someone who cares about me; and *hands* — someone who can help me with practical things like filling in forms.

This work did not follow a standard research approach, which meant the findings were speculative. I decided to use the work as the foundation for this doctoral research project.

Overarching Questions, Sub-questions, Hypotheses, and Methods

The broad research question at the core of this PhD has been to understand how a relationship between someone employed to offer support, such as a youth worker, and a young person facing severe and multiple disadvantage, influences the life course of the young person. This led me to frame five research questions: (1) how do young people and the workers who support them view the young person's situation? (2) what is the nature of a positive relationship between young people in these circumstances and their workers? (3) by what mechanism do worker-young person relationships influence the latter's health and development? (4) what is the profile of workers who build effective relationships with young people facing severe and multiple disadvantage and (5) what is the impact of professional helping relationships on the trajectories of people facing severe and multiple disadvantage?

Two sets of data have been used to answer the research questions. Specifically, questions 1 to 4 have been explored using data from a qualitative study of 30 young people aged 16 to 25 and their workers. The sample was drawn from 16 not-for-profit support organisations (five from the United States and 11 from the United Kingdom) selected on the basis that their practice was focused on providing positive relationships to young people who had experienced risks to health and development, including abuse or neglect, poverty, and substance misuse; additionally, such risk had significantly impaired the young person's health and development, leading to symptoms such as challenging behaviours, crime, or mental ill-health. The workers participating in the study were selected by leaders of the organisation on the basis of their ability to relate to young people in difficult circumstances. The final sample included 30 young people and 35 workers who were interviewed using protocols developed from the research literature on this topic. The analysis strategy was rooted in a critical realist framework with phenomenological elements employing Braun and Clark's thematic analysis approach (Braun & Clarke, 2006).

The final research question was studied using a secondary data set from a Canadian randomised controlled trial *At Home/Chez Soi*, a programme commonly known as Housing First, aimed at people facing severe and multiple disadvantage (Aubry, Nelson, & Tsemberis, 2015). A mixed method design was employed. Latent growth curve and growth mixture models assessed the impact of professional helping relationships across the sample as a whole and within subgroups with different patterns of housing stability. Thematic analysis revealed

factors that could explain why some sub-groups were more responsive to strong relationships with their workers than others.

What I Found (Summary of the Findings of Five Papers)

Paper One

Emotional reactions to risk and negative experiences of relationships lead young people to eschew support and advice.

- Sandu, R. D. (2019b). What are the characteristics of severe and multiple disadvantage as perceived by young people facing such disadvantage and by the workers who support them? Manuscript under review by the *Journal of Community and Applied Psychology*.

The starting point of this doctoral thesis was a definition of young people facing severe and multiple disadvantage. Paper one reviewed the literature on this population, including public policy and epidemiological definitions. Inattention to definitions based on how young people in these circumstances see themselves were noted.

The qualitative study addressed this gap and found that emotional reactions (such as shame) to their disadvantage led the young people to back away from civil society supports. The experience of being let down by past relationships created mistrust of offers to help. The young people developed capacity to rigorously assess potential helping relationships, resulting in most help being rejected. The combination of risk, shame, and a deep distrust of help distanced the young person from orthodox social networks. This, in turn, led young people to feel unworthy and unable.

Paper Two

The workers who are valued for their capacity to form relationships with young people prize a bond more than the resolution of risk.

- Sandu, R. D. (2019a). What aspects of the successful relationships with professional helpers enhance the lives of young people facing significant disadvantage? *Children and Youth Services Review*, 106, 104462. doi: 10.1016/j.childyouth.2019.104462

The role of emotions in disengaging young people from social supports provided one explanation for the limited impact of traditional services for this population. Effective intervention, it was hypothesised, would depend on workers being able to break down young people's defences and form meaningful relationships. Paper two documented the ways in which professional helpers built relationships with young people in the sample. The worker-

young person relationships resembled family relationships, with priority given to building bonds rather than simply dealing with risks or resolving conditions. Micro-processes characteristic of initiating, developing, and cementing these relationships are described in the paper. The nature of the relationship was reflected in workers' ethics. Personal norms, not the guidance of professional organisations, were used by workers to maintain boundaries in relationships.

Paper Three

The relationship reveals emotional reactions to risk, disrupts maladaptive thinking patterns, fosters agency, and generates a sense of worth and ability.

- Sandu, R. D. (2020). Worthy and Able: How helping relationships alter the trajectories of young people who face severe and multiple disadvantage. Manuscript under review by the *Journal of Community Psychology*.

Paper three sought to identify a mechanism to explain how good quality relationships between workers and young people facing a combination of mental ill-health, homelessness, addiction, or other major challenges may influence the young people's health and development. Relationships helped young people to recognise and overcome emotions associated with their circumstances, such as shame, and disrupted their maladaptive patterns of thinking. The relationship also fostered a sense of agency in the young people. The result was to reverse the negative sense of self so that young people felt worthy and able.

Paper Four

The attributes of workers able to form relationships with young people map onto the change mechanism.

- Sandu, R. D. (2019c). What is the profile of workers who build effective relationships with young people facing severe and multiple disadvantages? *Journal of Community Psychology*, 1-18. doi: 10.1002/jcop.22256

Paper four aimed to understand the qualities of the workers providing support to the young people. If family-like professional helping relationships have the potential to alter the young people's trajectories, what are the worker attributes that allow the formation of such deep bonds? Three sets of worker qualities, each of which mapped onto the mechanism of change identified in paper three, were identified. Worker qualities that altered the emotions of young people were: not giving up, showing interest, listening, and being genuine, available, approachable, sensitive, and accepting of young people. The disruption of negative thinking was achieved by being perceived as different from past helpers and displaying sharp

empathy, a willingness and capacity to address the young person's unhelpful behaviours. The fostering of young people's sense of agency was achieved by pushing opportunities, continually tracking progress, solving public systems challenges, advocating, and linking to other supports.

Paper Five

Partial validation of findings on impact of relationship on outcomes, and identification of limiting factors in an independent sample.

- Sandu, R. D., Anyan, F., & Stergiopoulos, V. (2019). Housing First, Connection Second: The impact of professional helping relationships on the developmental trajectories of housing stability for people facing severe and multiple disadvantage. Manuscript under review by *BMC Public Health*.

The final paper quantitatively tested some of the findings from the earlier sub-studies on a larger sample of workers supporting people facing severe and multiple disadvantage in Canada. The size of the available sample and the volume of missing data required the inclusion in the analyses of adults as well as young people. This study evaluated the impact of the client-worker relationship on participants' housing stability, a proxy for wider outcomes. Latent growth curve modelling confirmed that the quality of worker-client relationships helped explain the outcomes. A growth mixture model identified three sub-groups on the basis of housing stability trajectories. In one of these groups the quality of the worker-client relationship had minimal impact. Analysis of qualitative data sources on parts of the sample suggested that individual circumstances, such as high drug use, could limit the client's cognitive engagement with the worker and undermine the quality of their relationship. The analysis also highlighted programme-related factors such as high staff turnover as a limiting factor.

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Paper One

What Are the Characteristics of Severe and Multiple
Disadvantage as Perceived by Young People Facing Such
Disadvantage and by the Workers Who Support Them?

Under review by the *Journal of Community and Applied
Psychology*

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Author Note

This research is part of a doctoral dissertation and was supported by the author's previous employer, Dartington Social Research Unit. The author is grateful to the team at the Centre for the Study of Social Policy for securing access to the U.S. study organisations, data collection, and for participating in early data debriefs. The author also thanks B. Clarke and C. Sambo for technical assistance.

Abstract

The aim of this study was to explore the way young people facing severe and multiple disadvantage and their support workers perceive the circumstances of the young person. The leaders of 11 U.K. and five U.S. support-providing organisations identified 30 young people in great need aged between 16 and 25 and 35 workers for this study. Thematic analysis of the semi-structured interviews found that shame was a primary emotional reaction to severe and multiple disadvantage. A history of poor relationships led them to develop an acute assessment of others and a tendency to back away from help. Over time, they perceived themselves to be unworthy and unable. Findings underscored the young people's role in shaping their trajectories and shone light on the role of emotions in explaining disconnection from support.

Keywords: definition of severe and multiple disadvantage, shame, disconnection, unworthiness, disability, relationships

What Are the Characteristics of Severe and Multiple Disadvantage as Perceived by Young People Facing Such Disadvantage and by the Workers Who Support Them?

There have been many attempts to define severe and multiple disadvantage, reflecting public system inclusion criteria and epidemiology. The diversity of definitions is evident in the professional and academic language, for example multiple disadvantage, dual diagnosis, multiple and complex needs, high support needs, multiple disabilities, multi-problem, poly-victimisation, adverse life experiences (for a review of definitions, see Burnside, 2012; Finkelhor, Ormrod, & Turner, 2007; Keene, 2001; Porche, Zaff, & Jingtong, 2017; Rosengard, Laing, Ridley, & Hunter, 2007). The words tend to capture the mixture of the risks people face, the condition as defined by professionals, and the legal or administrative sanctions for the provision of money or services.

In this article, I look at the definition from the perspective of young people facing tough times and the workers who support them.

A Social Policy Approach to Understanding Severe and Multiple Disadvantage

Classification is intrinsic to social policy (Pinchbeck & Hewitt, 1969). Definitions change to reflect government concerns at the time legislation or other policy is framed. Axford (2007) showed how different lenses focused on impairment to development, restriction of human rights, loss of quality of life, or social exclusion ruled needy children in or out of eligibility for state support.

A comprehensive literature review of multiple and complex needs (Rosengard et al., 2007) identified at least nine sets of labels, including 1) mental health, including severe and lasting disorders; 2) medical *dual diagnosis*; 3) disadvantage due to age or transition from one stage of life to another; 4) geographical or temporal disadvantage, for example refugees fleeing abuse and violence; 5) cultural and circumstantial exclusion; 6) marginal, hard-to-reach, and social exclusion; (7) risk to self, service staff, or the community; 8) structural disadvantage such as poverty; and 9) severe or long-term impairment or disability.

Bramley, Fitzpatrick, Edwards, Ford, Johnsen, Sosenko, and Watkins (2015) linked three administrative data sets on people using services in England between 2006 and 2012. They estimated that 15 in every 1,000 adults of working age experienced some combination of homelessness, substance misuse, and offending behaviours. The study revealed that gender, age, poverty, childhood trauma, and poor educational experience played some role in the disadvantage. The most common profile was a male, aged 25-44, with a long history of poverty, difficult family relationships, and poor educational background. Famutimi and Thompson (2018), drawing on data from the Substance Abuse and Mental Health Services

Administration (SAMHSA), found that a third of the U.S. homeless adults admitted for substance use treatment between 2005 and 2015 had a co-occurring mental disorder.

Rankin and Regan (2004) synthesised definitions by giving priority to two types of vulnerability: breadth and depth of need. Breadth of need captured interconnected risks that demanded the resources of several publicly funded agencies. Depth of need related to the impact of risks on health and development and the amount of state support required (Cunningham & McCollam, 2001).

These social policy definitions have utility for government and public systems, as evidenced in both the U.K. government's "troubled families" initiative (Day et al., 2016) for those out of work or school and antisocial over an extended period of time, and the U.K. Big Lottery Fund's programme for people with multiple and complex needs (homelessness, reoffending, problematic substance misuse, and mental ill-health) (Moreton, Adamson, Robinson, Richards, & Howe, 2016).

An Epidemiological Approach to Defining Severe and Multiple Disadvantage

Epidemiology focuses more on the risks to health and development and less on system responses. Hobbs, Morpeth, Ellis, and Tobin (2019) surveyed approximately 100,000 children and young people from 23 English and Scottish local authorities to measure *key developmental outcomes* and a wide range of risks for these outcomes. They found that 25% had significant needs.

Porche, Zaff, and Jingtong (2017) drew on data from three U.S. national surveys on the health and well-being of children and adolescents and concluded that 10% of U.S. youth experienced three or more adverse life experiences in adolescence; these included: economic hardship, domestic or neighbourhood violence, parental incarceration, parent death, family member mental illness, or family member substance abuse. Other studies report that 10-48% (conceptual and methodological differences explain most of the variation) of adolescents have multiple adverse childhood experiences (McLaughlin et al., 2013; Saunders & Adams, 2014). Finkelhor, Ormrod, & Turner (2007) refer to this group as polyvictims.

Limitations of the Current Approaches to Definition

The proportion of the population exposed to multiple risks far exceeds the proportion getting specialist government sponsored help. Hobbs et al. (2019) found only a quarter of young people in greatest need were supported by social care, mental health, or youth justice systems. This is an empirical representation of Hart's (1971) law that high disadvantage is inversely related to public systems response. Hobbs et al. (2019) also measured civil society support, finding that most young in great need were supported by friends, family, and

community activists. A small proportion of young people (5%) experienced significantly impaired development and were also disconnected from both public systems and civil society support.

Disconnection from support is an overlooked dimension of severe and multiple disadvantage. People in great need who do not seek or get support tend to fall into two categories. One focuses on resilience, showing that many people exposed to multiple risks and some whose health or development is impaired live relatively uneventful lives (Fergusson & Lynskey, 1996; Garmezy, 1993; Luthar, 2003; Rutter, 1985). The second deals with the inefficiency of public systems (Rosengard et al., 2007), meaning that a high proportion of people exposed to and succumbing to risk do not get the help they need from public systems.

This literature does not explain why people in great need disconnect from both formal and informal sources of support. Kools (1999) and Samuels and Pryce (2008) showed that young people facing challenging times build effective strategies to deal with their situations and cope with their trauma. These strategies draw more on their own resources than assistance from others.

Kools (1999) found that adolescents in the foster care system used four strategies: hiding the foster child status, maintaining a defensive posture, distancing from others, and keeping relationships superficial. Young people carefully assess the ability to relate of people who could help them ([names deleted to maintain the integrity of the review process], 2015). Understanding in more depth the way young people use these strategies can help improve the response of practitioners.

Adversity undermines young people's sense of self. Kools (1999) found that the *veneer of self-reliance* masked a negative view of self, leading to social detachment. Given the key function of emotions in the process of social connection and the deficiencies in family support characteristic of vulnerable populations (Fergusson, Horwood, & Lynskey, 1994; Osgood, Foster, & Courtney, 2010), young people facing severe and multiple disadvantage present an unexplored opportunity to understand the role of emotions in the process of social disconnection.

Question, Hypothesis and Method

One of the main limitations of the existing literature is to overlook the role of the individual in defining and dealing with their own disadvantage.

Accordingly, the present research asked: What are the characteristics of severe and multiple disadvantage as perceived by young people facing such disadvantage and by the

workers who support them? Based on previous research showing how young people cope with trauma by building strategies (Kools, 1999; Samuels & Pryce, 2008), it was expected that similar tactics would be evident with this group as well. In addition, this research focused on uncovering how these strategies unfold in interaction with people who can help them. Consistent with previous research (Kools, 1999), it was expected that emotions would play a central role in changing trajectories.

Method

Sample

The sample included 30 young people and 35 workers from 11 U.K. and five U.S. organisations. The young people were aged between 16 and 25; had experienced a significant risk to health and development, including abuse or neglect, poverty, and substance misuse; had manifested significant impairment to health and development, for example challenging behaviours, and mental ill-health; had been supported by the organisation in the study for at least six months, leading to perceived positive change relative to their situation. The organisational leaders viewed the positive relationship between a worker and the young person as contributing to this change.

[Insert Table 1 about here]

The 35 workers were described in diverse ways, such as therapists, case workers, youth workers, and volunteers. Their supervisors and peers considered them to be exemplary in relating to young people, as demonstrated across many cases.

[Insert Table 2 about here]

Procedure

The present research is part of a comprehensive qualitative study into the potential of professional helping relationships to alter trajectories of young people facing significant disadvantage (Sandu, 2019a). A purposive recruitment strategy was used, alongside the author's professional networks, to identify U.S. and U.K. voluntary, non-profit organisations that supported young people. Leaders of each organisation were asked to nominate young people and workers to consider the consent procedure.

Interviews of between 45 minutes and one hour undertaken in a place where young people felt safe were voice recorded. Participants received gift cards (£20 in the United Kingdom and \$50 in the United States). The workers did not accompany the young people in the interviews but were available if needed.

Young people provided detailed accounts of their life circumstances to establish context and characteristics as perceived by the young people and their workers. Subsequent

questions reflected themes from the research literature described above. The final protocols were approved by ethics committees in each country. Pilot visits were undertaken, one in each country, to assess the feasibility of the instruments. Minor changes such as the ordering of questions were identified and implemented (see Sandu, 2019a, for final interviewing templates).

Analysis Strategy

Two out of the three main epistemological positions described by Willig (2013) informed a critical realist approach to the data. The strategy sought to understand and interpret the factors that led the young people into disadvantage and to understand their behaviour, thinking, and motives. The views of the workers provided new perspectives and tests of young people's views. The phenomenological elements were drawn out by repeatedly listening to participants' experiences.

The data were analysed using Braun and Clarke's (2006) six stage thematic approach. The coding started with a list of pre-defined codes with new codes added as required. Semantic as well as latent themes were coded. Themes were selected based on frequency and relevance to the research question. The analysis was conducted using the qualitative software NVivo11.

Trust in the findings (Lincoln & Guba, 1985) involved several steps. Interviewers debriefed after each visit to discuss emerging perspectives and potential biases. Triangulation was achieved both at the data source level, young people and workers, and at the analyst level. Agreement between the author and an independent coder was tested on a third of the youth sample: Cohen's kappa = 0.76. The author kept a reflexive journal of the coding process, summarising case studies, changes to the analysis strategy, and reoccurrence of and connections between themes.

Three further checks for variation in findings were conducted. First, a deviant case analysis revealed differences attributable to sample selection, problem definition, or young people's cognitive abilities. Second, the sample was divided into subgroups of those in which the data indicated reasonable or low-quality relationships prior to being supported by the worker. The analysis strategy was then repeated, revealing the study themes to have the best fit for young people with a history of major relationship breakdown. Third, an external auditor scrutinised the raw data, examining development and synthesis of themes. He also looked at the process notes and reflective journal to see how decisions or dispositions were captured. The auditing conclusion indicated consistency between the emerging themes and the raw data.

Findings

The primary findings are summarised in a thematic map (see Figure 1), covering the following themes:

- Poor relationships, past and current
- The role of shame in the way young people think and feel about themselves
- The acute assessment of those offering help
- Backing away
- Perceptions of self as unworthy and unable.

[Insert Figure 1 about here]

Bad Relationships, Past and Current

Whereas relationships are a source for support for most people (Cohen, 2004), participants' accounts of their past and current relationships were negative. With a few exceptions, young people came from families in which parents had been unable to nurture healthy development. Parental mental ill-health, addiction to drugs and alcohol, domestic violence, and child abuse were routine.

Y001: My mom, I guess she was on drugs. When I was six, we were taken by the state, so me and my little sister. Then what her dad always told me was protect her. She had a chance to get us back when I was eight years old, so two years later. She cleaned herself up, she got a job, she got her stuff back. The state didn't like what she was doing, so we went back to foster care. (Young person, United States)

H411: (Young person) and her sister had become looked after, placed in foster care, just before I started working with them. The sister was about four years older. Her own mother had a substance misuse issue with crack cocaine and alcohol. I used to see her mother,...sitting on a bench with a can of beer in the morning outside the post office, waiting for her benefit payments or she'd just been sleeping rough or just there. (Worker, United Kingdom)

Respite was seldom found in other close relationships outside of the family, with friends and romantic partners drawing the young people into gangs or domestic violence.

A301: Like before I came here, I was like mucking it with the wrong people.
(Young person, United Kingdom)

Loss of relationships was a recurrent experience for the young people in the sample. Bereavement was frequent and the causes of death — drugs, alcohol, and crime — were atypical. In other instances, young people actively broke personal ties, escaping a violent father for example or giving up on a drug-abusing mother. A few of the young people interviewed were parents themselves and had lost their children to foster care because of their chaotic life styles.

X112: He was taken away from his mom when he was two months old because of abuse and drug addiction. Dad was a high-level member of the (Name) gang, shot, paralysed. (Worker, United States)

Over half (57%) of the young people had received extended support from public systems, a few for their entire lives. For some, professional supports and substitute carers had been their close ones, and quality of relationships was variable. The young people described being let down by people charged with their care and not being treated as individuals.

Y001: I grew up in the system, and I don't like social workers. They tell you some stuff, and then lie. (Young person, United States)

H302: I've experienced it, and I've seen the habits of people, workers who criticise people all day. They'll be nit picking and everything you've got to do it right. And if you don't do it right, then there's an issue, you know what I mean. (Young person, United Kingdom)

As this pattern of failed and variable relationships continued, the young people were unable to describe any meaningful connections in their life other than their worker.

Z001: [...] my dad is in the picture, but in terms of being a supportive father figure I'm better at the job than he is. I just turned 18 so that says a lot. And my brother is just like a complete wreck. (Young person, United States)

Where young people could identify a past meaningful and constructive relationship, its utility was limited.

D411: (Grandmother) is brilliant as in a strong family member. But (Grandmother) doesn't understand what it's like to come off drugs or do sex work. (Worker, United Kingdom)

Positive relationships were counterweighted by dysfunctional relationships by direct (e.g., gang involvement) and indirect (e.g., unavailable parents) influences.

X004: In the street I was smoking a lot of weed, I was fighting a lot, I was hanging out with a lot of friends and bringing them to my mother's house. (Young person, United States)

K301: There's some people I was hanging out with, actually pull me down as well. Because like, I wasn't hanging out with the right people so I was kind of looking for trouble. (Young person, United Kingdom)

The Role of Shame

Extended exposure to dysfunctional, unreliable, or unresponsive relationships influenced young people's sense of self, especially a sense of shame, of distress produced by understanding past behaviours to have been unworthy. Words such as useless, worthless, disgusting, not amounting to anything, broken, second-class citizen, not worthy of others, and not good enough were frequent in young people's self-description. The language used applied to the entire self, extending beyond specific actions, such as crime.

G301: All I could see then was how much I wanted to die. I wouldn't be able to describe myself. I was awful. I was so broken, just, yes, desperate to get out of this world. (Young person, United Kingdom)

H301: I was a mess, I was just a mess. Like, I don't really like going back to that part of my life because it hurts. Because to see how I was then when I lived in that house there compared to how I am now, it's completely different. It was like, I was ashamed of myself. Like, the way I was. Like, when it comes to like, the appearance, I could always play the part with the appearance. But when it comes to the feelings and how you feel about yourself, it's not good. It's not good. (Young person, United Kingdom)

The shame was deep as well as broad. It was rooted in a rational assessment that someone with similar experience would feel the same. As such, the shame was hard to shake off.

G411: [...] shame is massive and I think shame, you know, you can't lose it and once you feel it, it sticks and it's really hard to kind of lose. (Worker, United Kingdom)

C412: She felt ashamed because she lost her children. She felt ashamed because she allowed a man to abuse, so she thought it was all her fault and that she deserved it. (Worker, United Kingdom)

The shame fed a continuous, strong internal dialogue about failures of the self, shutting out engagement with the everyday world.

F301: I used to have these thoughts, why is everyone leaving me? (Young person, United Kingdom)

P112: I used to have pity for myself. I used to definitely feel like...because I'm the black sheep I used to definitely feel like, Why is this happening to me? Why they did that? Why did you do this? Like, Why? Why? Why? Why? (Young person, United States)

In many cases young people blurred the boundaries between shame and guilt. They took undue responsibility for the behaviours of others.

Shame came from the perception of having failed to live up to the standards, ideals, and norms of others. Feeling ashamed, the young people naturally assumed that they were not worthy of help, and for many it took a major life event to jolt the young person into reflection about the world around them.

F301: There's a couple of workers that I felt like I haven't been accepted before. Like, do you really want to be sat here supporting me or telling me what to do? (Young person, United Kingdom)

D412: That's why the pivotal moment for many of those women was a near-death experience brought on by violence or drug-related illness or something associated with that work that then forces vulnerability into their faces, kind of thing, and presents some other choice, sort of. But yes, the intense pain of the everyday levels of shame that is there is actually what's underlying a lot of the, you know, the cycles and the patterns. (Worker, United Kingdom)

An Acute Assessment of Others

Disadvantage encourages people and agencies to offer help. Teachers support pupils beyond their formal educational and pastoral responsibilities. A young person kicked out of school is directed to a variety of professional supports. Homeless young people take their chances with a mostly empathetic general public. How did these young people view help?

They were sceptical. The recurrent negative relationships described appeared to lead the young people to doubt the motives and honesty of others. They were suspicious. They knew they could be hurt, let down, and disappointed. They were prepared to protect themselves from people who help. Their primary assessment was “how will this person make me feel?”

A411: Our clients distinguish very well. Very well. Very early because it's very important for their protection [...] What I want to tell you, am I zero, I am one, who are you? Are you going to section me, what is going to happen here? (Worker, United Kingdom)

G302: Even though I knew that I would have to take time to like break down my walls to try trust her fully, she never gave me any like vibes of like, oh she seems rude or she makes me feel uncomfortable. There wasn't any of that, I felt alright around her I guess. So yes, straight off the bat I thought she was okay. (Young person, United Kingdom)

W005: His aura was great. His aura, it was really positive. It was really strong, and he was just — he opened up with open arms. (Young person, United States)

This acute assessment of others is not a routine part of human interaction. It comes to the fore in contexts that require an assessment of the need for fight-or-flight. For the young people in this sample, however, the vigilance was continual. Accordingly, the assessments were visceral not rational assessments, relying more on nonverbal cues than answers to questions.

W001: It was just the connection — the way she [the worker] was talking to me, the tone of her voice, and the way she looked at me in my eyes. It just showed she's really there paying attention to whatever I'm saying and to the reasons why I'm upset. (Young person, United States)

Any worker wanting to form a relationship with a young person had to pass the assessment. A good first impression was not sufficient for the young people. It was followed by a rigorous testing of whether the worker cared, understood, and would provide practical help. Workers talked of “being watched, being analysed, and psycho-analysed.”

X001: I could tell it wasn't really just her trying to do her job. I could tell it was really her caring because anybody else, they could've just been like, just go to jail. Just go back to jail. You feel me? We don't care about your life right now, but she wouldn't. (Young person, United States)

Young people search for acceptance, for people who would take them on their own terms. “Authentic” was a common descriptor, someone would be who they said they were, even if that fell short of what was required. “Genuine” was another word frequently used by young people and their helpers.

T001: But he seemed, out of all the staff, when I first started coming here...the most genuine — the most that actually like cared about the kids and stuff in the centre, you know. (Young person, United States)

H412: I think you have to be yourself, always. I think women or people who've been through stuff they can pick up bullshit very, very quickly, so if you're presenting as something that you're not, then they won't... You're not authentic in the work and how can you support them if you're not authentic in yourself. So I think you have to be yourself, you have to be honest with people. (Worker, United Kingdom)

Backing Away

In addition to a range of behaviours consistent with their mental ill-health, addiction, educational and employment disadvantage that often set them apart from mainstream society, their sense of shame and recurrent experience of being let down by others led them to further back away, including from people who could offer them support.

Young people described being overwhelmed by their experiences and disadvantage. They found it difficult to understand and process feelings. To compensate, they developed protective strategies to separate themselves from their emotions. The transcripts contain recurring phrases such as “shield up,” “bottling up,” “big wall up,” or “shut down.”

G302: I feel like my walls will never go down until I've literally sat down and literally let everything go. Because I feel like once you've been hurt by people that

are meant to love and protect you, it's hard to trust people that are strangers. You get what I'm saying? (Young person, United Kingdom)

W001: I won't tell you anything about me, or I wouldn't explain stuff to you. I wouldn't tell you how I'm feeling that day. I'd just completely shut you out. (Young person, United States)

Alcohol and drugs was another common strategy to numb powerful emotions.

D412: That you've maybe put drugs before your children. And that your children have gone into care. How do you live with what you've had to do to get the drugs, on the thought that you've put a chemical of somebody else you know, an important relationship? It's so so hard, it's such a big thing. And that is you know, what can often lead people back down into those cycles, is you know drugs. Drugs are a very useful way of masking and taking away the pain of coping with what you're doing. (Worker, United Kingdom)

When unleashed, young people were frequently unable to regulate their feelings and became verbally and physically aggressive. Official records referred to them "storming out," "having a short fuse," "banging off," "bouncing off the walls," "being jumpy," and being subject to "blind rage."

Z002: I was cussing out everybody. I didn't care. I was just angry, blinded by rage. (Young person, United States)

Y112: Within that episode, (Young person) went AWOL. She would destroy property. She would be very belligerent to adults in authority. She did not do well with structure, people telling her what to do. She thought everyone was against her. She didn't feel like anyone was doing anything for her. (Worker, United States)

Unworthy and Unable

Young people summarised their characteristics in three ways. First, their lack of worth excluded them from the orthodoxies of life, education, work, and family. Second, they felt undeserving of attention or support from others, so distanced themselves from those who could help. Third, they did not feel in control of life or capable of influencing the world in their favour.

H302: [...] a year ago, I didn't feel proud. I was making myself sick and I was, you know, just like, just being. I weren't living... I was surviving. (Young person, United Kingdom)

X002: Back then I would have said I do what I need to do to try to survive. People just don't understand me. Back then I wouldn't have even had kids. I was thinking I'm doing what I need to do to survive. I don't care what anybody thinks because they're not in my shoes. (Young person, United States)

K301: [...] who has a lot of potential but he's throwing his life away over guess he's not thinking, so yes. (Young person, United Kingdom)

Discussion

Definitions rooted in public policy and epidemiology can miss important facets of people's lives and so respect the design of effective responses. This study has shone light on the characteristics of young people facing severe and multiple disadvantage. It finds that emotional reactions to disadvantage such as shame leads them to back away from public system and civil society supports. The experience of being let down by past relationships creates mistrust and acute assessment of support. The combination of risk, shame, a deep distrust of help and distancing from society leads young people to feel unworthy and unable.

Research Implications

This study confirms Samuels and Pryce's (2008) finding that the protective instinct developed by young people when they were consistently under threat is counterproductive. In particular, it supports Kools' (1999) research into the relationship between a negative perception of self and social detachment. Moreover, the findings in this study underscored how the young people's emotional reactions to the risks faced are core to an understanding of their life trajectories. The heavy, self-conscious, and deep-seated nature of shame takes forward the conceptualisations of Tangney and Dearing (2003) by showing its role in forging young people's trajectories and the accumulation of disadvantage. The evidence fits with Lewis (1971) who wrote that we feel guilt over specific actions and shame about the global self.

The evidence from this study provides detailed examples of Schafer, Shippee, and Ferraro's (2009) work that pointed out that negative self-assessment that pushes people

facing difficult times away from help and society is also the foundation of their building resilience.

Theory Implications

The findings have implications for how attachment theory applies to a context of severe and multiple disadvantage. The lives of young people in this sample was underpinned by poor relationships. Their mistrustful, protective pattern of connection to others suggest a combination of avoidant and preoccupied attachment tendencies. However, the young people also used their template of relating to distil in the context of their relationship with their workers. Whereas typically the process of filtering new data operates outside of conscious awareness (Griffith, 2004), so making it less amenable to change and adaptation, in this study the young people used what they have learnt from their previous relationships and analytically engaged with what new people could offer to them.

This study has some implications for how we understand identity development for this group by expanding the narrative of apparent self-reliance proposed by Samuels and Pryce (2008) and Ungar (2011) by the focus on self-worth and competence in identity formation. Charting processes that reinforce positive or break up negative identities would improve support for this population.

Limitations of the Study

The study has several limitations. First, because the sample comprised young people and workers perceived to enjoy strong relationships, the findings cannot be generalised to all young people facing severe and multiple disadvantage. Second, and in a similar vein, the young people were supported by organisations known to the author's social network and considered to be exemplary in their practice. Nothing can be said about the variation in practice or young people not supported by agencies. Third, because data on young people's backgrounds were collected retrospectively, only limited conclusions can be drawn about their life trajectories. Fourth, the data were collected using a single instrument applied in two countries, limiting the potential to gain deeper insights by adapting protocols in light of emerging findings such as the role of cognition in the way young people define their situations. Fifth, with the benefit of hindsight, more data could have been collected on the way young people's definitions of their situations reflect their context of support provided by the organisation and the knowledge imported by workers about historical cases.

Policy and Practice Implications

The emotional reaction to risk and its impact on sense of self point to the role of connection in the recovery process. At present, most public policy is focused on interventions to reduce a risk or ameliorate defined conditions. Most of the young people in this study had previously been exposed to a range of treatment interventions which they and their workers discounted as important to recovery.

This leads to several opportunities for practice development. How does the absence of early nurture, love, and safety and later disconnection influence resilience in protecting against multiple disadvantage and in the recovery process? As Maibom (2010) noted, shame requires an audience; another route into this could be to find effective ways of breaking down shame, for example by connecting young people to relationships that unshackle them from negative emotions and help them to recover their abilities and worth to society.

This study puts a spotlight on the relational capabilities of workers. Young people closely analysed the intervention techniques and personal qualities of workers looking for what in previous studies ([names deleted to maintain the integrity of the review], 2015) was described as three “H”s, of: head, meaning the ability to focus on shared goals, not organisational objectives; heart, referring to a deep sense of care; and hands, concerning the practical help provided to the young person. More could be done to identify workers who have these capabilities.

Finally, the findings prompt reflection about the types of outcomes society seeks for young people facing severe and multiple disadvantage. Public policy is focused on the reduction of psychological symptoms, educational disadvantage, and addictions. Without a sense of worth or competence it is hard to predict the success of any intervention in reducing psychological disorders, educational disadvantage, or their outcome.

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Table 1
Youth Sample Demographics and Characteristics (N = 30)

Age range	16-25
Gender	
Male	18
Female	12
Reported housing difficulties	9
Reported mental health disorders	8
Reported emotional regulation difficulties	13
Reported self-harm (three attempts to commit suicide)	5
Reported substance misuse	5
Reported difficulties with education	11
Reported loss of family members (two murders)	5
Reported involvement with social care system	7
Reported involvement with criminal justice system	8
Social network	
<i>Social support</i>	
Perception of availability of someone to rely on	
Yes	5
No	20
<i>Composition</i>	
Positive ties	
Absence	7
Limited (one person)	9
Two or more people	9
Negative ties	14

Note. The characteristics above were mentioned freely and were not elicited by the researcher during the interviews. Given the young people's support from agencies that deal with populations with severe and multiple disadvantage, the actual number of risks they faced is likely to have been higher.

Table 2
Worker Sample Demographics and Characteristics (N = 35)

Gender	
Male	10
Female	25
Professional qualifications*	
In social sciences	20
Other fields	1
No higher education	4
Role in the agency**	
youth worker	7
outreach worker	4
program manager	4
mental health worker	3
development worker	2
case worker	2
key worker	2
practitioner	2
case manager	2
support worker	1
therapist	1
link worker	1
family support worker	1
teaching assistant	1
youth coach	1
project coordinator	1
Reported years of experience of supporting people with multiple and complex needs	
1-5	12
5-10	10
Over 10	8

* Not all workers spoke about their professional backgrounds in terms of their professional degrees.

**The diversity in worker labels reflects the fact that their support-providing role is not clearly defined in this context.

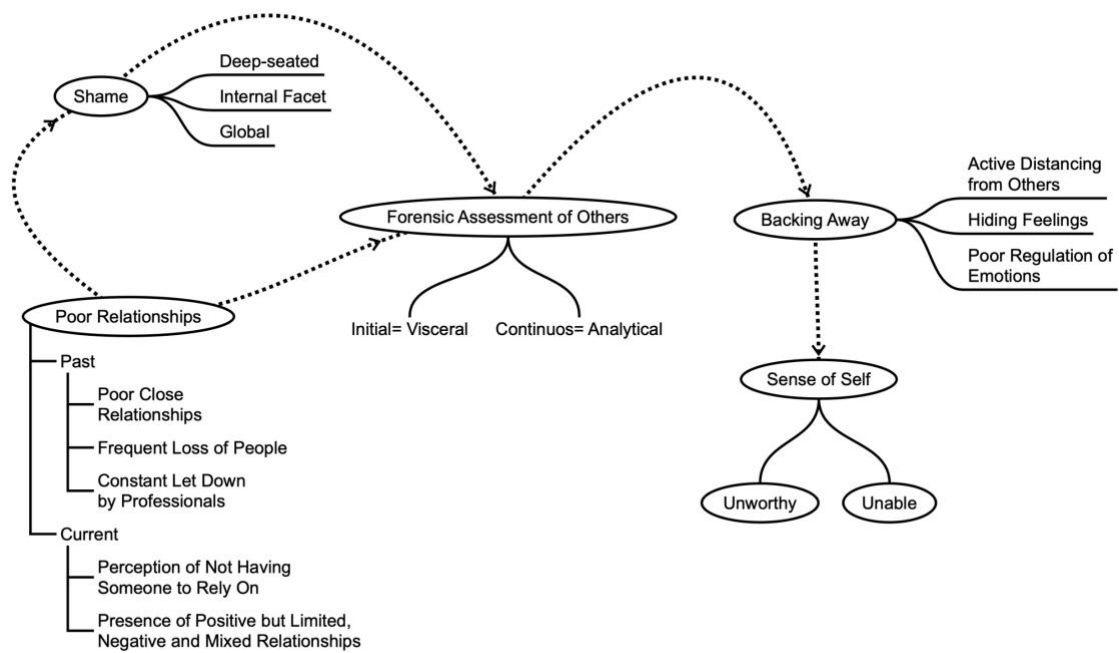


Figure 1. Characteristics of young people facing severe and multiple disadvantage as perceived by themselves and the workers who supported them.

Paper Two

What Aspects of the Successful Relationships With Professional Helpers Enhance the Lives of Young People Facing Significant Disadvantage?¹

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¹ Sandu, R. D. (2019a). What aspects of the successful relationships with professional helpers enhance the lives of young people facing significant disadvantage? *Children and Youth Services Review*, 106, 104462. doi: 10.1016/j.childyouth.2019.104462

Abstract

A recent study (Sandu, 2019b, under review) has identified a new set of characteristics of young people facing severe and multiple disadvantage and highlighted the role of emotions in the disconnection from support, which opened up unexplored avenues for intervention with this population. This study documented the ways in which professional helpers (n = 35) from 16 support organisations (United Kingdom = 11; United States = 5) built relationships with young people (n = 30) in these circumstances. Thematic analysis of the semi-structured interviews indicated that relationships in this context resembled family relationships, where the focus was on building a bond rather than dealing with risks or resolving conditions. Micro-processes characteristic of initiating, developing, and cementing these relationships have been described. Relating in this context demanded a different support approach from the workers who used personal ethics to maintain healthy boundaries in the relationships, not the guidance of professional organisations. The findings brought to the fore the role of social connection with its implications for policy and practice as a primary form of response to young people in great difficulty.

Keywords: family relationships, context of significant disadvantage, breaking professional boundaries, personal ethics, young people

What Aspects of the Successful Relationships With Professional Helpers Enhance the Lives of Young People Facing Significant Disadvantage?

Over the last three decades, the preferred response to social need has been to prevent or reduce the risks that threaten the health and development of individuals. This approach has gradually evolved into the design of specific programmes, including a category referred to as evidence-based programmes such as Multisystemic Therapy (MST) or Functional Family Therapy (FFT). These interventions focus on specified risk factors. Much progress has been made in this way of thinking, for example in reduction of anti-social behaviour or promotion of positive development.

However, for people facing multiple and severe risks to their development, this standard approach to dealing with need becomes problematic. There is a shortage of available evidence-based programmes that address multiple risks and severe disadvantage (for exceptions, see Baldwin et al., 2018; Bevington, Fuggle, & Fonagy, 2015; Chorpita, Daleiden, & Weisz, 2005). Public systems such as criminal justice or mental health system do not deal efficiently with people whose needs cross administrative boundaries (Cornes, Joly, Manthorpe, O'Halloran, & Smyth, 2011). This is illustrated, for instance, by the high proportion of homeless people misusing drug or alcohol who are unsupported by addiction agencies because they are homeless and unsupported by housing agencies because they are addicts (Keene, 2001; Rankin & Regan, 2004).

Previous research (under review) described the characteristics of young people facing severe and multiple disadvantage and offered insights as to why so many are disconnected from public systems and informal supports despite their great needs (Hobbs, Morpeth, Ellis, & Tobin, 2019). The disconnection was explained in terms of their emotional reaction to their circumstances, for example in their sense of shame at being homeless, suffering mental ill-health, or being addicted to substances. This research (under review) showed that, when coupled with recurrent experiences of being let down by potentially supportive relationships, young people facing great difficulties to their health and development backed away from and were mistrustful of supports from civil society and public systems. When young people reached what they call “the bottom,” they perceived themselves as unworthy and unable. The author’s research (under review) suggested that interventions that focus on reducing risk and ameliorating disorders without addressing the young person’s emotional reaction to the risk may have limited success.

This paper explored whether — and how — relationships between young people facing severe and multiple disadvantage and professional helpers can be effective responses

to those living in these difficult circumstances? Previous qualitative work with young people in these circumstances (Little, Sandu, Truesdale, 2015) suggested that positive relationships might attenuate the shame, bolster weakened social networks, and so instil a sense of worth and ability. This paper explored such relationships in greater depth.

Background Literature

There is a rich body of literature on aspects of the relationship between individuals in need of help and those able to offer that help. Relatively little of this literature deals with young people, and hardly any of it focuses on those facing multiple risks to their health and development (for exceptions, see Boer & Coady, 2006; Gur, 2006). Previous research (Sandu, 2019b, under review), described how relationships for this group contribute to, rather than alleviate, the difficulties faced by the young people facing great disadvantage, for example in the way they create doubt and suspicion about the intention of people coming to their aid. Others have also documented the variable contribution of helping relationships to the welfare of children and young people (Callahan & Lumb, 1995).

A review of the literature suggested four themes for extended exploration: the mechanism of change; the qualities of the helper; the alliance between helper and helped; and the micro-processes that run through the relationship between helper and helped. These topics are discussed in greater detail below.

Mechanism. A great deal has been written about the therapeutic relationship between mental health professionals and their patients (or clients). Much of this literature attempts to explain in theoretical terms — there is little empirical evidence — how the dynamic between therapist and client influences case outcomes (Brattland et al., 2019; Frank & Frank, 1993; Rosenzweig, 1936). Some writers (Orlinsky, Ronnestad, & Willutzki, 2004) see the therapeutic relationship as the central mechanism of change.

Much of the thinking about therapeutic relationships has been inherited from psychoanalysis (Horvath, 2000). In Freud's view, clients' positive attachments to analysts gave the latter the authority that in turn provided clients with the confidence to delve into their pasts. The relationship was not "real" in the sense that it mirrored quotidian social connections. It was a mechanism to expose past traumatic experiences. Once the trauma was brought to the surface, it could be resolved and the relationship between the therapist and patient had no further function.

Similarly, behavioural and cognitive therapies (Horvath, 2000) have regarded therapeutic relationships as a medium for techniques such as cognitive restructuring,

monitoring, or in-vivo or imaginal exposure. The relationships are viewed functionally, almost as safe contexts within which therapists can do their work.

Therapist quality. Carl Rogers (1957/1995), the founder of humanistic therapies, saw therapist-client relationships as having more than functional roles. In the humanistic perspective, relationships had a healing function, helping clients to know themselves in the context of the world they inhabit. For Rogers, the relationship involved two equal parties. There was no expert in the relationship, and if someone had to be chosen to be in charge of the process, it would be the client. The most valuable currency being exchanged were the clients' subjective experiences, how they felt in the moment of the interaction with the therapists. By this process, clients became agents of their own change.

This call for equality did not sit easily with the historically popular perceptions of the powerful therapist role. It demanded different qualities in a therapist. Rogers viewed three in particular as the necessary and sufficient conditions for helping individuals, in or out of therapeutic contexts. The first was acceptance, also known as unconditional positive regard. It referred to the respect and regard of the therapists for the clients and the ability to be non-judgemental. The second quality of understanding referred to the therapists' insights into the clients' world as the clients saw it. The third quality was what Rogers described as a genuine attitude and concerned the therapists' capabilities to monitor their own feelings during therapy and, when appropriate, to communicate these to the clients.

Genuine is a hard word to define. However, it has appeared many times in the literature created over the last five decades (Gelso, 2011; Klein, Michels, Kolden, & Chisolm-Stockard, 2001). Corey (2005) argued that hiding behind professional roles was a common reason for failing to connect with clients. A recent metasynthesis (Noyce & Simpson, 2018) of 13 studies showed that clients connected on a deeper level with their therapists when the latter were open, honest, and willing to disclose personal and professional information. Such disclosure explained about 10% of the variance in therapist quality (Ain & Gelso, 2008, Ain & Geslo 2011), raising the possibility that clients had additional ways of assessing whether their therapists were genuine or not, for example using nonverbal cues.

The body of literature that deals with therapists' qualities and how they relate to client outcomes has grown a great deal since Rogers's time. One recent review (Norcross, 2011; Norcross & Wampold, 2011), commissioned by the American Psychological Association's Division of Psychotherapy, has identified a set of empirically supported elements of therapeutic relationships, including empathy and unconditional positive regard. The ability to

see and manage countertransference, the process by which clients triggered feelings hidden in the therapists' subconscious, is another example.

Working alliance. Rogers talked of therapists and clients being equal. However, most of the available evidence was focused on the therapists' skills (in using the relationship as a medium for effective therapy) or qualities (for acceptance, understanding, and genuineness). Gelso and Carter (1985) shifted the definitional focus to the dyad, emphasising the dynamic between therapists and clients. For them, "the relationship is the feelings and attitudes that therapist and client have toward one another, and the manner in which these are expressed" (Gelso & Carter, 1985, p.185).

This shift in definition built on Bordin's (1979) concept of the working alliance in terms of which helpers and people being helped connect through a bond. Building on this foundation, they jointly set a goal of collaborating and finding tasks to achieve that goal. A shared bond, tasks, and a goal: These three elements have endured over three decades of subsequent research into the working alliance concept (Castonguay, Consantino, & Holtforth, 2006).

Some evidence on the working alliance is directly related to those whose disadvantage is severe, multiple, or both. For example, a strong working alliance may provide the means to correct a client's insecurities (Gur, 2006; Harpaz-Rotem & Blatt, 2005). Others (Stiles et al., 2004) have exposed the pattern of development of healthy working alliances, revealing the importance of unsettling events in bringing helpers and helped closer.

Micro-processes. Wiseman and Tishby (2014) are among a group of scientists who have highlighted the micro-processes within therapeutic relationships that explain variations in client outcomes. One such micro-process involves the level of connection established early in therapy. Sexton, Littauer, Sexton, & Tømmerås (2005) discussed the role of non-technical activities in fostering a deep client-therapist bond. These include the therapist's ability to do the following: listen, focus on the client, refrain from overloading the client with information or advice, and show emotion.

Immediacy, which is the ability of therapists and clients to talk about their relationship, is another granular variable pertinent to the therapeutic relationship. Hill et al. (2014) found that such conversations were avenues for both clients and therapists to explore their feelings, negotiate tasks and goals, discuss other relationships, and address ruptures in the relationship. They also noted that therapists were not as forthcoming about their feelings as clients. Lastly, the client's attachment made a difference to the types of immediacy event

initiated, with therapists being gentler and more focused on exploration, rather than on discussing ruptures with clients characterised by insecure attachments.

There is also evidence of micro-aspects negatively affecting the client-therapist dynamic, such as client disaffiliation or resistance. For example, Muntigl and Horvath (2014) showed that, when clients disagree with or disaffiliate from their therapists, responding immediately or, worse, pushing clients further will generally be counterproductive. (The authors recommended waiting until the relationship was repaired before exploring the point of tension.)

In a similar vein, the timing of challenging clients may also influence the client-therapist dynamic (Ribeiro et al., 2014). This research suggested clients have a therapeutic zone of proximal development, from current to potential. When therapists worked at the clients' actual levels, they tended to validate their experiences; when they worked at the potential level, they challenged the maladaptive narratives. As shown in their study, working outside of this optimal spectrum may sustain the client's ambivalence in therapy.

Most of the evidence reviewed above dealt with therapeutic relationships with people who are not facing significant adversity. A relatively new avenue of exploration examined the micro-processes that underpin all kinds of helping relationships (i.e., not only relationships between professional helpers and people in need but also between case managers and clients or between relatively untrained *key workers* and clients). This evidence put stress on the following: persistence on the part of helpers; the way in which relationships were built from everyday non-professional dialogue or "small chat"; seeing the helped in the round; going the "extra mile"; and showing a genuine attitude, including being prepared to reveal aspects of personal lives (Boer & Coady, 2006; Parr, 2016; Ribner & Knei-Paz, 2002). The importance of workers behaving like "friends" may play a key part in building bonds between helpers and helped (De Leew, van Meijel, Grypdonck, & Kroon, 2012). In addition, Parr (2016) found that the success of helping relationships depends on non-confrontationally challenging the clients. She suggested that every-day interactions boost the helped's confidence, giving them a greater sense of control over their future lives.

Professional helping relationships, in or outside therapeutic settings, are usually governed by professional codes of conduct to safeguard the well-being of vulnerable clients from potentially ill-intentioned helpers. Lazarus's (1994) seminal paper on how certain boundaries diminish therapeutic effectiveness created a fierce debate. Hart (2017) also highlighted the narrow quantitative approach to professional boundaries adopted in youth work professions. The author used ethnographic data to document how boundaries could be

conceptualised qualitatively, for example considering the kind of behaviours that are appropriate in the relationship (e.g., the kinds of affection appropriate at different stages) without recourse to classification into acceptable or unacceptable categories (e.g., personal affection is not allowed). Currently, the conventional wisdom is that crossing a boundary for the benefit of the client, for example hugging when a client is in distress, can be practical and positive (e.g., Zur, 2001). More so, the rigid application of boundaries may conjure up previous unhelpful life experiences for members of certain populations (Vasquez, 2007). This discussion is mirrored in ethics in the contrast between universal theories such as Kantianism and utilitarianism, and contextual approaches as virtue ethics that promote codes of conduct that are situationally appropriate (Banks, 2010; Carr, 2011). Situational ethics put greater stress on the character of the worker and objectives for progress defined by the one being helped (Russell, 2014). A strong debate about the nature of professional boundaries continues (e.g. Barnett, Lazarus, Vasquez, Moorehead-Slaughter, & Johnson, 2007).

Summary. This paper is focused on the nature and impact of the relationships between the people charged to provide help to young people facing multiple challenges to their health and development. The research literature shaped this exploration in several ways. First, there is a strong body of evidence exploring how relationships can serve as the primary vehicle for delivering therapeutic input via techniques, such as psycho-therapy or behavioural change. This research has shown the importance not only of the quality of therapy but also the qualities of the therapist, whether they are empathetic or “genuine” — open and honest — for example. A second strand of research explored the strength and nature of what is called the *working alliance* between helper and helped and its influence on the trajectory of the helped. A third and more recent line of inquiry has explored the micro-processes that shape the helper-helped dynamic and the extent to which they bear upon the success of professional-client relationships.

Research Questions, Hypotheses, and Method

This research was designed to assess the nature of positive relationships in the context of great difficulty, documenting the ways in which professional helpers build relationships with young people in these circumstances.

Specifically, it sought to answer the following research questions. First, how can the young people’s emotional reactions to risk influence their receptiveness to help? As shown elsewhere (Sandu, 2019b, under review), young people were expected to exert substantial influence by resisting help during the early stages of the relationships with their workers. In addition, this research sought to identify the practitioners’ responses to such resistance.

Second, what are the micro-processes that characterise healthy dynamics between workers and young people? In line with previous research, processes underpinning helper-helped relationships were expected to mirror those found in natural relationships, for instance behaving “like a friend” or having everyday non-professional dialogue. As well as exposing such processes, this research was designed to provide a theoretical rationale for these linkages.

Third, what do young people facing great difficulty look for in helpers? Building on previous research (Sandu, 2019b, under review), it was hypothesised that young people would look for relationships that have the potential to address emotional reactions to risk, such as shame, as well as the risk itself.

Methods

Sample

The sample included 30 young people and 35 workers from 11 United Kingdom organisations and five United States organisations, allowing for the inclusion of a sufficient number of organisations and participants to cover the wide spectrum of definitions of severe and multiple disadvantage found in the research literature. Young people had the following characteristics: aged between 16 and 25; had experienced a history of risk to health and development, including abuse or neglect, poverty, and substance misuse; had manifested significant impairment to health and development (for example, challenging behaviours, crime, or mental ill-health); had been supported by a voluntary or not-for-profit organisation for at least six months; had made a positive change relative to their situation since being involved with the organisation; and had formed a significant positive relationship with a worker in the organisation.

[Insert Table 1 about here]

Workers who took part in the study had the following characteristics: had job that involved supporting young people (e.g., as therapists, counsellors, youth workers, or volunteers); were considered by leadership and peers to be exemplary in their role, particularly at relating to young people; and had been repeatedly identified by users as someone with whom they had formed positive relationships.

[Insert Table 2 about here]

Procedure

Access to populations of people facing severe and multiple disadvantage is limited so the study’s recruitment strategy was purposive. One way to gain access is via charitable organisations set up to provide support to these young people. As such, voluntary or non-

profit organisations in the United Kingdom and United States that supported young people aged 16-25 facing multiple and severe disadvantage were identified through the author's professional networks. Leaders of each organisation were asked to nominate young people and workers with the characteristics described above.

Young people and their workers were interviewed (between 45 min and 1 hour on the premises of the support organisation) using a set of questions based on a series of themes drawn from the research literature previously summarised. Participants received gift cards for participating in the research (£20 in the UK and \$50 in the US; differences reflect the larger number of organisations involved in the UK). The final protocols were approved by an ethics committee in each country (Ethical Committee of the Centre for Social Policy in the Warren House Group at Dartington in the UK and Metis IRB in the US). Pilot visits were undertaken, one in each country, to assess the feasibility of the instruments. Minor changes related to the order of questions, rather than content, were identified and the instruments were amended accordingly.

[Insert Table 3 & 4 about here]

Analysis Strategy

Two out of the three main epistemological positions described by Willig (2013) were appropriate for the data set. The analysis was informed by a critical realist approach, meaning it was designed to capture and interpret what happened when young people who were exposed to significant disadvantage developed a relationship with a support worker. This approach puts the researcher into the role of a detective, unpacking the processes related to the study phenomenon, trying to understand the behaviour, thinking, and motives of the participants. The second position from Willig was to explore the phenomenological elements, primarily the subjective experience of participants, of what they felt and did while in the relationship with their workers. This partially put the researcher into the role of person-centred counsellor who listened empathetically to participants' experiences.

The data were analysed using Braun and Clarke's (2006) six stage thematic analysis approach (familiarise with data; generate code; search for themes; review themes; define and name themes; and write report). The coding was done paragraph-by-paragraph, starting with a list of pre-defined codes but with an open mind to new codes. Semantic as well as latent themes were coded. Each theme was selected based on its frequency and relevance to the research question (final themes and their respective frequency codes included: asymmetrical and non-reciprocal relating (117); common ground (78); difficulties (102); family

relationships (128); boundaries (119); context (180). The analysis was conducted using the qualitative software NVivo11.

Several steps were undertaken to check the trustworthiness of the findings (Lincoln & Guba, 1985). Data were debriefed at a binational team level, which comprised several meetings with the U.S. collaborators involved in the research, for instance data collection, but not data analysis to discuss emerging perspectives and potential biases. Triangulation was achieved both at the data source level, by collecting views from helpers and young people, and at the analyst level, by checking the reliability of emerging codes. The author and one independent coder (MSc student) worked on a third of the youth sample starting with a list of three broad pre-defined codes (collaborative dimension; common with natural relationships; context in relationships). They held five meetings whereby they compared their coding and worked together on emerging codes through dialogue. The agreement between the author and the independent coder computed using interviews with a third of the youth sample was Cohen's $\kappa = 0.76$. Raters, for example, agreed that there was an element of asymmetry in how these relationships started, with the workers doing more than the young people to get the latter engaged in the relationships; difficult moments helped to strengthen the quality of the connection between the young people and the workers. These checks generated further insight and several changes to the coding framework (see Fig. 1 for the coding tree for a third of the youth sample), which the author applied to the entire sample of youth and then workers (see Fig. 2 for the final coding tree). Alongside these steps, the author kept a reflexive journal of the coding process, recording summaries of case studies, changes made to the analysis strategy, and other aspects deemed noteworthy, such as reoccurrence of a theme or connections between themes.

Further analyses were conducted to check for variation in findings. This was done in three ways. First, a deviant case analysis, where a case that does not fit a pattern in the data is compared to a typical case, revealed differences in the findings that might be explained by sample selection, definition of severe and multiple disadvantage, and the young people's ability to reflect. Second, once the primary themes were established, the sample was divided into subgroups of those who had reasonable and low-quality relationships. The analysis strategy was then repeated on both subgroups. This revealed that the themes emerging from the analysis better characterized the subgroup of young people who had poorer quality relationships. Third, an external auditor scrutinised the raw data, examining the way in which data were synthesis as well as how themes emerged and were linked. He also looked at the process notes and reflective journal to see how decisions or dispositions were captured.

The auditing concluded that there was consistency between the emerging themes and the raw data. The feedback enriched the author's perspective on several themes.

A thematic map was drawn to summarise the primary findings (see Fig. 2). It illustrates the themes found to be central to the nature of helping professional relationships in the context of severe and multiple disadvantage.

Findings

[Insert Figure 2 about here]

The analysis revealed that the following themes described the nature of helper-young person relationships in a context of significant disadvantage. According to the data, relationships in the context of supporting young people who face severe and multiple disadvantage were as follows:

- Started with asymmetrical and non-reciprocal relating
- Developed by establishing a common ground between helpers and young people
- Cemented during difficult times
- Were like family relationships
- Violated standard professional boundaries but were ethically sound
- Depended on a context that could facilitate the development of healthy relationships.

Started with Non-reciprocal and Asymmetrical Relating

The young people and helpers in my sample met each other in different ways. Some young people had been referred to the agency by public systems and then assigned to their worker. Others were found on the streets, in their homes, or in their communities by workers doing what is called *outreach*. A few workers were assigned to work with a young person as part of a court order.

The relationship started with a trial period. During this time, helpers had to prove to the young people that the relationships were going to differ from those they had experienced in the past. The workers understood the young people's hesitation about meeting potential sources of help, so they gave the young people time and evidence of how they would be more reliable than those who had let them down in the past.

Relating in the early stage of the relationship was both non-reciprocal and asymmetrical. For weeks, extending sometimes into months, the young people responded minimally to the helpers' attempts to engage. Often, after a meeting or two, they disappeared, in some cases leaving few traces revealing how they could be found. The helpers were not passive. They went out of their way to engage with the young people —

visiting, texting, using social media. Young people described the helpers' relentless attempts to engage as a form of stalking, of having someone on their back, and of being hunted down.

X001: Her? She's on my back until I come back into the building. She does everything in her power to get me back into that building. That's when I started noticing that yeah, she really does care because anybody else would be like, c'mon, you're on probation. You've got mad stuff to lose. You feel me? It's weird. Just get yourself together. That's when I could say I really hit it off with her. I know that she really cared when she started just over-texting me. (Young person, United States)

X114: They're not happy to see you in the beginning, and so I started talking with her. I reached out. Her phone didn't work. I'd try to go on Facebook. Find her there. We do lightly stalking. We talk to their family. We knew a cousin of hers. Just to see where she was at. (Worker, United States)

The non-reciprocity was also evident in young people continually keeping their guard up, revealing little to nothing about themselves to the helpers. Young people in these circumstances used their acute sense of others to assess new relationships. A helper who refused to give up and continued to show up, despite the young person's reluctance to engage, proved her caring.

X112: What they're saying is, "I have been let down by people like you every step of the way. I'm not ready for you. You say, "No problem." They're not saying that. They're just saying, "Fuck you" and you're saying, "No problem. I'll be back tomorrow. I'll be here until you're ready." (Worker, United States)

Developed by Establishing a Common Ground Between Helper and Helped

As the relationships progressed, workers continually searched for points of connection, for common ground with the young people. The two entered into relationships with different roles, intentions, and expectations.

The common ground was built around the personal connections and was evident in two ways. First, the focus of conversation was on everyday subjects and largely avoided the difficulties faced by the young people or potential resolutions, such as medication, mental health treatments, or routes back into education or employment. Workers and young people talked about topics that people generally discuss when they are getting to know each other. This included the games they played, the books they read, the sport teams they supported, the

gyms they attended, and the neighbourhoods in which they had lived. These were affectively neutral aspects of their personal backgrounds, and only sometimes, and never routinely, did they discuss their experiences of disadvantage.

Z001: It turned out we liked a lot of the same things; like I like Playstation 1 and he likes Playstation 1. He grew up where the weather was extremely cold; I grew up in (where the weather is also extremely cold). It's weird. (Young person, United States)

The second way in which personal connection was used to build common ground was the preparedness of the helpers to step outside their professional roles to reveal aspects of their personal lives.

Y112: I think that allowing them to feel me out and understand who I am first and being open, not always trying to receive information, but give them some more personal information about myself, such as yeah, I have a daughter; I have a three-year-old, getting very personal with them sometimes, but not too personal. (Worker, United States)

The function of assembling common ground can be understood in the context of the nature of the disadvantage experienced by the young people (Sandu, 2019b, under review). First, the common ground was affectively neutral, addressing the emotions that caused young people to back away from risk and feel both unworthy and unable. As such, it built the foundation for connection as well as a sense of worth and created the potential for the recovery of agency. Second, in terms of the development of the relationships between helper and helped, the common ground of personal connection represented previously absent symmetry and reciprocity.

Difficult Times Cemented the Relationship

Difficult situations were recurrent in the lives of the young people. They were frequently a source of embarrassment, a further reason to hide away from the world. In the context of an emerging bond between helper and helped, these difficult environments became an opportunity to both cement relationships and for the helpers to be of practical assistance.

The nature of the difficult situations varied from case to case, ranging from needing transportation to go to court, needing a place to live after being evicted, and, in a handful of cases, advice and support after being jailed for alleged crimes. Three common elements crossed situations: 1) no one other than the helper was available for the young person at the

point of crisis; 2) the magnitude of the challenge produced a degree of vulnerability in the young people; and 3) the challenges had the potential to produce further distress, for example eviction and subsequent street homelessness.

Such challenges helped cement the relationships in four ways. First, they constituted a concrete test of the helpers' availability and capability. For someone to show up at a moment of significant crisis carried great meaning for young people with a history of multiple disadvantage.

F411: I just think that sort of knowing that you've got someone to go to whenever, whatever if the problem is. Whenever, you know, that you haven't got to be making appointments. You can phone. We'd just be there. I think just to have someone you know. What we often hear, is someone who's got your back, that's what they say. They like to feel where anything that goes on, whether it be good or bad, that you can come here and they got someone to talk. Talk about stuff to. (Worker, United Kingdom)

The second contribution of the helpers' responses during crises was to break past patterns wherein the young people would avoid social contact for fear of being let down. In these instances, the helpers demanded the opportunity to provide support, and the young people acquiesced.

X113: Other than showing up all the time, it's just the basic needs. Some of these young men have never had someone show up when they fail. When they failed at something, and oftentimes they will, that's when we like to say we do our best youth work. (Worker, United States)

Third, the young people's vulnerabilities in the face of crisis helped solidify the relationships with helpers because it allowed the workers to see them at their lowest point. They encountered the situations — being stabbed, robbed, jailed, living on the streets, hospitalised, or not having any basic resources — and also the emotions associated with them. For some young people, there was desperation. Some said they wanted to die. Perversely, in such dire contexts, the walls between the young people and the outside world could be permeated.

X001: Yes, when I was going through with my mom. She's so financially unstable. It's to the point where I was barely having food in the house. My gas is still off right now. It was one day I just reached out to her. Usually, the way my pride is set up,

I'm not going to personally ask somebody else, especially when I'm going through something like that. I don't like asking people for stuff like that...[] I told (the worker) I had no food in my house. She took one of the cars. She took me to Stop and Shop, and she basically filled my whole fridge up. Right then and there that's when I was like, I got the whole trust buddy thing because anybody else would've been like — I could tell she didn't do it for the whole pride thing. She did it because she really cared. (Young person, United States)

The fourth source of stronger relationships was the actual help — sometimes of a practical nature, at other times emotional — provided by the workers. Young people described their workers as “going the extra mile.” For some workers, the added “distance” meant learning new skills, like giving legal advice, being on call 24-hours a day, and consistently being available by phone or text. More routine help included dealing with public services agencies (for example, securing beds or negotiating bureaucracy, such as that associated with getting a new passport).

F412: There's nothing that we say, well that's not our job. It's not my job to be, you know, family law advisor. But, it's a bit part of my job. It became a bit part of my job through the people that we'd see, so I made it my business to go find out; I made it my business to go find out what's going on with legal aid; what's the state at the moment? Who's entitled? Who's not? What forms need to be filled in? How do you approach the court for contact? Because I had no idea. But, through my research... I'm actually quite knowledgeable about that kind of stuff now, so when it comes through, I know exactly what I'm saying. (Worker, United Kingdom)

Repeatedly overcoming difficulties together deepened the relationships between young people and workers. Eventually, the young people began to reciprocate. Not only did they start to seek help from their workers, but they also initiated contact. They sent texts. They asked to meet for coffee. This led to expressions of emotion and responsibility. The development was illustrated by one young person who, after the initial engagement with his worker, disappeared for weeks but towards the end of the process apologised profoundly for missing a single appointment.

It Was Like a Family Relationship

As the relationships became established on firm footings, they began to take on attributes of close relationships. The helper-helped relationship eventually resembled family relationships, as illustrated by the five subthemes described below.

First, each time the young people faced new difficulties, the helpers were first in line among the options to whom the young people might turn to for help. (Initially, the hierarchy might comprise one member, the worker, but over time it grew, with the worker remaining the first port of call.) The idea that we organise sources of help hierarchically so that, in a crisis, we can ensure adequate responses to our needs was articulated by Bowlby (1969/1982) and other attachment theorists. Children select from their attachment figures those who respond immediately to cries for help. Hierarchy, therefore, is both adaptive and characteristic of particular types of relationships.

Y001: If I do something wrong, I know you're going to be — if I go to jail tomorrow, I know who to call, you feel me? If I do this, I know who to call. (Young person, United States)

Secondly, the hierarchical nature of the relationships was reflected in the phrases used by young people to describe their workers, for example “someone I can look up to,” “a role model,” “a mentor,” “a father figure,” words that indicate trust, authority, a preparedness to bow to that authority, and a connection that went beyond the purely professional. These characteristics are also typical of parent-child relationships.

K304: He's just been there for me. He's taking me, he's giving me advice. He's basically like a big brother to me like just tells me how things, what to do, stuff like that, you know. (Young person, United Kingdom)

W003: I didn't see him as oh, you're just a counsellor, or you're just the director in the program I'm involved in. I saw him as a role model, someone I could look up to and talk to about stuff that would happen in my life. (Young person, United States)

Thirdly, the strength and endurance of these relationships were not contingent on the young people's behaviour, making it difficult for young people to repeat past patterns and back away (Sandu, 2019a). The workers expected variable behaviour patterns and recognised negative emotional reactions as risks for disconnection, leading them to compensate with extra efforts to re-engage. The process involved dealing with personal abuse, the sabotage of plans, and managing others tests of the relationship. The workers did

not take the young people's behaviour personally and recognised feelings of unworthiness or not being able to complete basic tasks as normative.

When the helper-helped relationship was cemented, the helper's support became unconditional. Like family members, workers' senses of commitment were not contingent on the young people's behaviour although limits existed. As in a family, unconditional love did not mean giving in, accepting every transgression of norms, rules, and laws. The worker pointed out what was wrong but did not associate the reprimand with threats to limit future support.

A411: All clients have their own forms of engagement. They'll phone you in particular situations. They want your help for particular things or, you know? What I try to say, what is important is to keep the continuity with this population. As long as they are in the game, as long as you help them keep fighting, keep fighting, don't give up, you're fine. A lot of bad things will happen in that period and you will see a lot of disasters fall, as it happens for (name young person), he nearly killed himself, and ended up in hospital several times, assaulted his mum. But if you stay long enough, good things will start to happen as well, and you just have to be long enough. (Worker, United Kingdom)

Fourth, the bond between the workers and young people played out, as it does in family relationships, via day-to-day routine activities like eating together, taking coffee together, taking leisure trips, or talking about how to get through challenges. The nature of the difficulties to overcome — eviction, being chased by drug dealers, or spending nights in jail — may be different from typical family relationships, but their quotidian quality provided the bases of family-like bonds.

H412: And we might have done fun activities, so just things kind of that would take her away from her reality. Sometimes which, sometimes we can take these things for granted, so it could have been maybe getting her nails done or a fun activity, which often as I said, we can take for granted but for somebody who's going through, through something it often has a bigger impact. (Worker, United Kingdom)

Finally, in some interviews, the young people actively compared the workers to family members.

K302: I would say he's like a father figure, I guess, like a father figure. (Young person, United Kingdom)

In summary, there were several ways in which the relationships between young people and workers looked like family relationships. For a short and critical time in the young people's development, they connected with individuals who behaved like and/or who could be perceived as legal guardians. This subterfuge could only be maintained by the workers' guile, as indicated below.

Violated Standard Professional Boundaries but Maintains Strong Personal Ethics

What rules governed the interaction between the helpers and the young people? These relationships consistently violated the standard boundaries of professional helping relationships, particularly therapeutic relationships. Eight rules of conduct for therapeutic relationships were broken in the helper-helped relationships described.

First, most therapeutic encounters take place in designated spaces, clinics, hospitals, or social work offices. The helpers and helped studied here almost always met on the street, away from official buildings, in cafes, at the aquarium, in the young person's house, in the car on the way to court, or at the nail salon. Meetings in formal state-funded contexts occurred when they were unavoidable, for example when young people were imprisoned or hospitalised.

K411: I might say oh, I'm coming down to [location] to the youth club, do you want to meet me? We'll go and get something to eat. So then we go and get something to eat, I'd buy him some food and just talk like that. (Worker, United Kingdom)

Second, the amount of time the workers spent with the young people was not limited by bureaucratic conventions, such as the one-hour-per-week session common in therapy or the greatly restricted contact time in modern social work (Cottam, 2018). Contact times were adjusted to fit with the young people's needs. This seldom followed a regular pattern. Moreover, late arrival was not considered a reason for cancellation.

Third, although personal disclosure by therapists is not addressed in the APA ethics code (APA, 2016) and is a matter of professional discretion, most clinicians do not use it as a therapeutic technique (Hill & Knox, 2001). In the helper-helped relationships described in this study, the helpers routinely revealed aspects of their personal lives, especially where that could help establish common ground with the young people.

P112: Because it's also letting you see, if (the worker) is opening up, and telling me about his personal stuff, why I can open up to him, and tell him what's going on. A lot of times it's like you don't want to say to them I did this, I did this, but you say

“This is what I was going through, this is how I handled the situation, but it’s different now, so how would you handle the situation?” (Worker, United States)

Fourth, the role of the conventional therapist is clearly defined. What therapists do and how they behave with their clients is usually related to the school of thought in which they have been trained. In addition, most therapists and social workers are accountable to and governed by an overarching professional body, the British Psychological Association in the United Kingdom and the American Psychological Association in the United States, for example. These boards are responsible for advancing the field and maintaining standards of conduct amongst their members.

The workers in the study had no such sources of support. Their training was variable (and typically was not a part of their identity). As their support-providing role was multi-faceted, they operated as if there was no formal code of ethics. They aspired to no model of treatment, partially because evidence-based solutions for this population are scarce (e.g., Hawley & Weisz, 2002). The workers assumed many roles. They could be advocates for the young people. At times they were mentors. They played the part of friends, listening. They were advisors. They could be in loco parentis, supporting the young people in court.

H301: And [the worker] helps me out a hell of a lot. So... With problems that I have, like financial problems, debts and issues with contact, talking to people, because I’m not good at talking to people. Getting into services that I need to be in. (Young person, United Kingdom)

Fifth, displays of affection and physical contact, such as hugging, are matters of concern in therapy, requiring, at a minimum, reports to clinical supervisors. Therapists are not allowed to nurture deep feelings for their clients, nor are they encouraged to express warmth towards them. By contrast, the helpers in this study were prepared to show their feelings and physical contact was routine. The workers in this study talked explicitly about the deep care they felt for the young people they were supporting, and some were prepared to use the word “love.” In some instances, workers were explicit with young people about their feelings.

G301: And yes, just comfort and love and, you know, cuddles. I loved cuddles, and I needed cuddles. So yes, I used to like go into the office and just be like, I need a cuddle. (Young person, United Kingdom)

P111: I would go into supervision and I would talk to my supervisor like, “This young person keeps telling me that they love me and I don’t know what to say.” And she was like, “What do you really feel? Do you feel like you love her?” And I was like, “Yeah, I really do care about her and I really love that she’s doing this and I really care about her well-being.” And she was like, “Well if you care about her and you love her, you tell her you love her back!” And when I told her that I love her too she was like — it was as if — I was like. “Wow.” (Worker, United States)

Sixth, maintaining digital boundaries, meaning how to ethically use modern digital and internet technologies in helping professions, is another aspect that has not been specifically addressed in the APA ethics code (APA, 2016), leaving therapists unsure of how to best handle clients’ Facebook friend requests, for example (Barnett, 2010; Zur & Zur, 2011). In the helper-helped relationships, private correspondence — via WhatsApp, Facebook, personal mobile, telephone numbers — was a primary means of communication. It follows that there was much more exchange between workers and young people than would occur in conventional clinical relationships.

K411: So just keep trying to phone them; text them if you can't phone. I'll text them or WhatsApp; we've got WhatsApp on our work phones as well so I can WhatsApp. So kind of adjusting to how they will communicate. And I think using the voice on WhatsApp; using the voice option, so the audio. So texting and messaging is good but you still can't get across the, you know, emotional of how you're communicating. So I think the audio now, over, like, this year I've been using the audio more because then I can kind of... Yes, because then they can hear your voice and it's more personal and they understand exactly the way you're saying this as well. (Worker, United Kingdom)

Seventh, therapists are not allowed to maintain dual or multiple relationships, meaning that when relationships with clients come to resemble friendships, the therapy should end. Therapist cannot treat relatives. By contrast, the professional relationships in this study blended in with social relationships, eventually resembling family relationships. Sticking to professional roles was not an option because it reinforced memories of negative past experiences.

Lastly, whereas most client-therapist relationships end after a designated number of sessions, those in the context of severe and multiple disadvantage are open-ended. The

worker-young people connections varied according to need and context. Many young people kept in touch with their workers after the interventions has been brought to a formal conclusion.

W005: I will always have (Person01) in my life. Even if I stop working here, I will always come to (Person01) to ask for his advice [...] Even if I leave, I'm still part of the family. I will always have his number so I can call him any time I want, and he will always pick up. This is a family for life, so even if 10 years down the line I would need something from them, or I need advice, or help from anything, I know that they're going to be there for me. (Young person, United States)

Although the workers violated most formal therapeutic boundaries, they were clear about the personal ethics which formed the boundaries for their relationships with the young people. Some were universal, for example not giving money to the young people, not inviting them to the workers' homes, not sharing deeply personal information, or not developing romantic relationships with their clients. Others were contextual, for example informing young people that missing or being late for their appointments with the workers was not acceptable.

In summary, despite not being restricted by professional codes of conduct, the helpers in this study were explicit about their ethical standards and principles and were consistently honest, loyal, and dependable.

X111: For my strategy, it's always laying down that boundaries and letting them know, "Listen. The only thing that I ask for you" – the other thing is I tell them, "The only thing that I ask for you is to be honest with me." I always give the example, like I say, "Say you have a drug problem, and I'm asking you, 'Hey, how you doing with your substance?' If you tell me that, 'Oh, I haven't been smoking. I'm doing A, B, C, and D. I'm doing well,' then I wouldn't know. Then we're going to be talking about something else that's different..[.] "If you tell me that, 'You know what? I've been using,' then we could actually have a real conversation and address the issues. (Worker, United States)

Z001: With (Person01) it was just, you know, I'm going to treat you with as much respect as you treat me. You know, if you act like an adult, I'm going to treat you like an adult. And if you act like a 5-year-old, I'm going to treat you like a 5-year-old because you're not going to get anywhere if we start treating 5-year-olds

like adults. So I was like, I like your logic you know. You're not asking me anything unreasonable and you understand that you can support me, but sometimes I need space. There was just a good understanding between us and it worked out in the long run. (Young person, United States)

Context That Hindered or Facilitated Development of the Relationships

These relationships were coloured by the young people's legal statuses — if they were young, they were required to go to school, or they might be subject to court orders requiring them to stay in treatment settings — and their personal needs (for example, if they were homeless).

G301: I came into a treatment centre and yes, I met her and she was my recovery worker. (Young person, United Kingdom)

X112: The first time I go – it's a really great time to build the relationship when they're in jail because it's a captive audience and they're usually really low, and really needy, and nobody visits them. Sometimes, but very rarely. He's just grateful to have someone there for him. He's just telling me all about his life, all about the situation he's in, and engaging in a ton of change talk at this moment because he's in jail. "I want to change. I want to this. I want to that." (Worker, United States)

Such context can make young people ready for strong relationships. Workers spoke about young people who knew what they wanted from the relationships; some, for example, felt that it was time for them to change, perhaps by taking advantage of opportunities to get back into college or work.

A411: Sometimes you have very clear goals. You know, I just met with a girl, and it was very clear. I mean, gives you an agenda, a shopping list. Sometimes it looks like a shopping list, you know, and they say, well, I'm going to get a flat so I need help with the furniture and actually I need a bus pass and I need... I've been thinking about counselling because I was abused sexually. Like that, eh? She was telling me all these terrible things like, you know, like telling me they want to the hairdresser, okay? I'll give you a shopping list. Fantastic. We'll have her so pleased. Let's discuss how we'll get there. (Worker, United Kingdom)

Other young people were spurred on by quick wins, such as when their workers were able to help with structural issues like housing.

Y112: (Young person) went to a teen shelter that we have here, and they eventually found out that she had nowhere to go. They called it in to (Agency name) is what we call it here, and she came into our care. (Worker, United States)

Some of the young people were incentivised by the chance to right significant wrongs from their past, such as recovering access to children removed into the care of the state. Others were spurred on by positive stories about their workers told by young people they had supported previously or from collective feedback about the agency that employed the worker.

X003: I let him do it because I heard about (Agency) and what they do. I was just trying to find a way to get away from my situation that I was in. (Young person, United States)

On the other hand, the significant challenges that precipitate the relationship — mental ill-health, potentially anxiety and paranoia, for example — continued to make the connections difficult.

H302: Well, I've got mental health [problems] and she doesn't have mental health, obviously. She might not understand some things that I say or understand like, say if I say I'm hearing voices, she might not be able to relate to that, because she's never had... gone through that before. (Young person, United Kingdom)

Relationships That Promote Wellbeing in the Context of Severe and Multiple Disadvantage

Summarising these findings, the relationships that developed between professional helpers and young people facing multiple disadvantage looked more like natural relationships than therapist-client relationships and eventually came to resemble family relationships. The connection was fiercely tested by the young people who drew on past experience of being let down by others. The helper compensated with extra care and persistence. Their objective was to establish a bond, not to reduce risk or resolve conditions. By encountering and overcoming a series of difficulties together, the relationships deepened. The workers used personal ethics to maintain healthy boundaries in the relationships, not the guidance of professional organisations.

Discussion

These findings cast new light on the mechanism of change, the qualities of the therapist/worker, the working alliance between helper and helped, and the role of micro-processes in the context of young people facing multiple disadvantages.

First, the extant literature of mechanisms has focused on explaining how therapies can alter patterns of risk or disorder, as when treatment surfaces hidden trauma. By contrast, the present findings put much greater emphasis on connection, on helping the young people to re-connect with the world, its routines, and supports. (Disadvantages, such as mental ill-health, may continue, but the young person were better able to cope with their effects.)

The literature on therapeutic quality focuses on trainable routines whereas the focus here was on human qualities. As with previous research (Boer & Coady, 2007; Parr, 2016; Ribner & Knei-Paz, 2002), young people in difficult circumstances valued workers who showed extra care and persistence, who were curious about young people's interests and not just their condition, and who were genuine in their interaction with young people. However, this study also revealed a number of qualities sought by young people, such as love or the need for affection, that demanded workers described in these pages to hold different boundaries and ethics when they supported them. Why so? Maybe there was something inherent in the worker? Or in their life experiences? Or something in the context in which they operated? More research is needed on understanding how workers develop the qualities required to relate to young people in these circumstances.

The research on working alliance underscored the value of a shared sense of bond, task, and goals, which was partially evident in this study. The workers' efforts and the young people's focus on establishing a personal connection indicated the primacy of a personal alliance; it also indicated a secondary role of a task alliance (Hougaard, 1994) within the working alliance established between workers and young people in great difficulty. Although, as the relationships strengthened, the young people began looking to the workers for leadership. Particularly when overcoming difficulties together, the bond remained the cornerstone of their relationship. In this respect, this study indicated that working alliance components may play out in different ways for different populations, in line with Norcross & Wampold's (2011) recommendation for tailoring relationship practices to the population served. Thus, more research on this topic would lead to a refined conceptualisation and underlying processes of working alliance.

The present study highlighted the micro-processes characteristic of relationships between workers and young people in great difficulty. While existing research suggested that

therapists should back away and wait when clients disaffiliate from therapy (Muntigl & Horvath, 2014), in these relationships the workers' behaviour were described by young people as "stalking." The helped's resistance, in these relationships, elicited the helpers' persistence. This finding challenges the notion of a therapeutic zone of proximal development (Stiles, 2001; Vygotsky, 1978). Whereas Ribeiro et al. (2014) showed that therapists need to work within the remit of the clients' levels of development, this study showed that helpers worked outside of the young people's zone of proximal development for the benefit of proving their caring.

Other micro-processes revealed by this study, for example having mundane and personal conversations, helped to further strengthened the bond between the workers and young people. Lastly, a number of micro-processes, such as those involved in overcoming difficulties and in building bonds that resembled family ones, were instrumental in deepening the relationships between young people and their workers.

As well as exposing such processes, this research was designed to provide a theoretical rationale for these linkages. Attachment theory addresses mechanism, therapist quality, and working alliance, particularly in relation to the way Bowlby and Ainsworth described healthy relationships between caregivers and children. Here, the helpers became the "go to" persons when the young people faced difficulty. The assistance that the helpers provided ranged from practical help to emotional comfort, which suggests that the helpers were providing the safe havens specific to attachment relationships. There was an aspect of authority in the way the young people perceived the helpers as stronger and wiser. Permanency was reflected in the helpers' abilities to remain in the young people's lives regardless of how the young people behaved. Attachment figures should provide secure bases for the young people. In therapy, Bowlby (1988) explained this as the therapist's ability to help clients revisit the past and to encourage reflection on its contemporary impact. The data in this study provided only partial support for this belief but also drew attention to the importance of reciprocity.

In other respects, the worker-young person relationships were quite unlike attachment relationships. Workers were generally paid whereas family members are not remunerated for their filial responsibilities. The workers were often "parents" to several unrelated young people, a situation only replicable in families with several adopted children. The relationships were time limited. Once the young people were back on their feet, the workers' involvement diminished and then ceased. There was no formal social role for the workers in

the long-term. The legal obligations of the workers and parents are also different. A parent's first concern is for their child whereas a worker has responsibilities to the state, citizens, and their employer.

Effective relationships require the workers to replicate many of the qualities of strong caregiver-child bonds but in a context that denies such bonds. Negotiating this divide takes great skill and goes well beyond the training and guidance provided by professional bodies.

Moreover, elucidating the mechanism of change — the way in which helper behaviours such as looking for common ground, offering a quasi-family relationships, and the violation of professional boundaries might alter the young people's conditions — is a further step in establishing the role of relationships in the lives of these young people.

The limitations of the study are many. First, the sample focused on organisations and workers that value relationships above therapy. The analysis revealed little about ineffective relationships. Second, the qualitative sample, although substantial for this type of research, was designed to build hypotheses. Therefore, in the absence of follow-up or a control group, we cannot conclude that social connections to workers produce better outcomes than treatment. Moreover, the study was not designed to compare therapeutic with the natural helpers described in the paper, greatly restricting conclusions about difference and its effects. Third, it was not possible given the sample size and scope of the study to consider the system and organisational influences on the workers. Fourth, the sample structure has been determined a priori using selection criteria developed independently of the data collection and data analysis. A gradual selection, for instance, would have highlighted the importance of including capability to reflect and articulate as an additional criterion for young people. Fifth, the purposive nature of the study involved relying on pre-existing networks to gain access to this population. Although the organisations who took part in the study were dispersed geographically (across the U.K. and U.S.) and covered a wide population ranging from young people dealing with homelessness, gangs, Gypsy and Traveller people, substance misuse, or excluded from education, their definition of severe and multiple disadvantaged matched the existing variety of labels from the research literature. Sixth, taking into consideration the low-quality experience of relationships for this group, more value should have been placed on building a point of connection with the young people before interviewing them. This would have allowed the research to gain even greater depth into the research questions. Finally, the data did not elucidate individual differences in the relationships between workers or young people. Therefore, questions such as “do some

workers do this better than others?” or “is the situation of some young people more amenable to treatment or connection than others?” could not be answered.

Implications for Policy and Practice

In past decades, science has permitted a much better understanding of the aetiology and incidence of mental ill-health as well as of effective intervention strategies. These data underline the need for more and better services. The study focused on a subset of young people whose disadvantages were multiple. For them, the challenge of mental ill-health and other risks to development were significant, but this was secondary to the problem of disconnection from public sources of help. Most of the helping relationships in this study focused on connection not therapeutic intervention. More weight could be placed on public policies that focus on the prevention of social exclusion.

The role of a therapist is clear — to make a diagnosis and to provide appropriate treatment. The role of the worker outside of the treatment context is not as well-articulated, and as such it can be less valued. This study suggested that successful relationships between helper and helped in the context of severe and multiple disadvantage follow predictable patterns. These patterns could be better expressed, studied, and understood, providing an alternative set of responses for young people whose need is characterised as much by disconnection as by diagnosable disorder.

The violation of professional therapeutic boundaries by the workers in this study whilst being ethical in their approach to supporting young people in great difficulty demands reflection about the effectiveness and appropriateness of the current rules of conduct within helping professions. If workers in this study would not have broken the conventional rules of conduct dictated by their profession or organisation, the chances of reinforcing negative past experiences and therefore not developing relationships with young people would have been high. Thus, this study added to the growing, albeit small, empirical research (Hart, 2017) documenting the way in which rules of conduct need to adapt to the context in which support is given. Solely relying on boundaries rooted in right and wrong ethical principles that may lead to responses that neglect the needs of certain populations. This research adds support to introducing a complementary perspective, such as virtue ethics related to the character of workers (e.g. honesty), which would have consequences for the training of future helpers.

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Table 1
Youth Sample Demographics and Characteristics (N=30)

Age range	16-25
Gender	
Male	18
Female	12
Reported housing difficulties	9
Reported mental health disorders	8
Reported emotional regulation difficulties	13
Reported self-harm (three attempts to commit suicide)	5
Reported substance misuse	5
Reported difficulties with education	11
Reported loss of family members (two murders)	5
Reported involvement with social care system	7
Reported involvement with criminal justice system	8
Social network	
<i>Social support</i>	
Perception of availability of someone to rely on	
Yes	5
No	20
<i>Composition</i>	
Positive ties	
Absence	7
Limited (one person)	9
Two or more people	9
Negative ties	14

Note. The characteristics above were mentioned freely, and were not elicited by the researcher, during the interviews. Given the young people's support from agencies that deal with populations with severe and multiple disadvantage, the actual number of risks they faced is likely to have been higher.

Table 2
Worker Sample Demographics and Characteristics (N = 35)

Gender	
Male	10
Female	25
Professional qualifications ^a	
In social sciences	20
Other fields	1
No higher education	4
Role in the agency ^b	
youth worker	7
outreach worker	4
program manager	4
mental health worker	3
development worker	2
case worker	2
key worker	2
practitioner	2
case manager	2
support worker	1
therapist	1
link worker	1
family support worker	1
teaching assistant	1
youth coach	1
project coordinator	1
Reported years of experience of supporting people with multiple and complex needs	
1-5	12
5-10	10
Over 10	8

^aNot all workers spoke about their professional backgrounds in terms of their professional degrees.

^bThe diversity in worker labels reflects the fact that their support-providing role is not clearly defined in this context.

Table 3

The Structure of the Interview Protocols for Young People

Sections interview	Topic
Part I: Introductory chat	Young people identify someone working at the support agency with whom they had a relationship that was important to them
Part II: Relationship with the worker	First impression Development of the relationship Turning points/ Positive and negative moments Worker qualities that contributed to/hindered the relationship Young people's qualities that contributed to/hindered the relationship 1 (<i>never</i>) to 10 (<i>always</i>) number exercise on key elements in relationships (e.g. trust; care) and follow-up with an example Short description of other meaningful relationships in the young people's lives
Part III: Life changes over the course of the support from the agency	Changes in the young people's life since they started coming to the support agency Follow-up questions about how young people explained such changes
Part IV: Self-perception	Self-description, current and past Sense of control and sense of pride, current and past
Part V: Conclusion	Advice for essential worker qualities in supporting young people in these situations

Table 4
The Structure of the Interview Protocols for Workers

Sections interview	Topic
Part I: Introductory chat	Workers identify a young person with whom they formed a positive relationship and helped to improve their situation.
Part II: Relationship with the young person	<p>The beginning of the relationship</p> <ul style="list-style-type: none"> Description of the young person and their situation Factors that contributed to/hindered the relationship Goals for change for the young person <p>The middle of the relationship</p> <ul style="list-style-type: none"> Progression of the relationship Positive changes in the young person and reasons for it Turning points in the relationship <p>The end of the relationship</p> <ul style="list-style-type: none"> Signs for when the worker was no longer needed Worker's role in the young person's progress Factors that hindered the young person's progress Changes in emotions and agency of the young person Description of the worker's current relationship with the young person
Part III: Workers' ability to support young people in difficult situations	<p>What workers do when they relate to young people</p> <p>Personal and professional qualities involved in relating to young people and their development</p> <p>Ways in which relationships with young people benefit workers</p> <p>Emotions associated with supporting this population</p> <p>Reasons for when the relationship does not account for progress in the young person</p> <p>How the support agency supports/hinders the workers' ability to relate</p> <p>Ability to form and maintain several relationships</p> <p>The role of shame in this population</p>

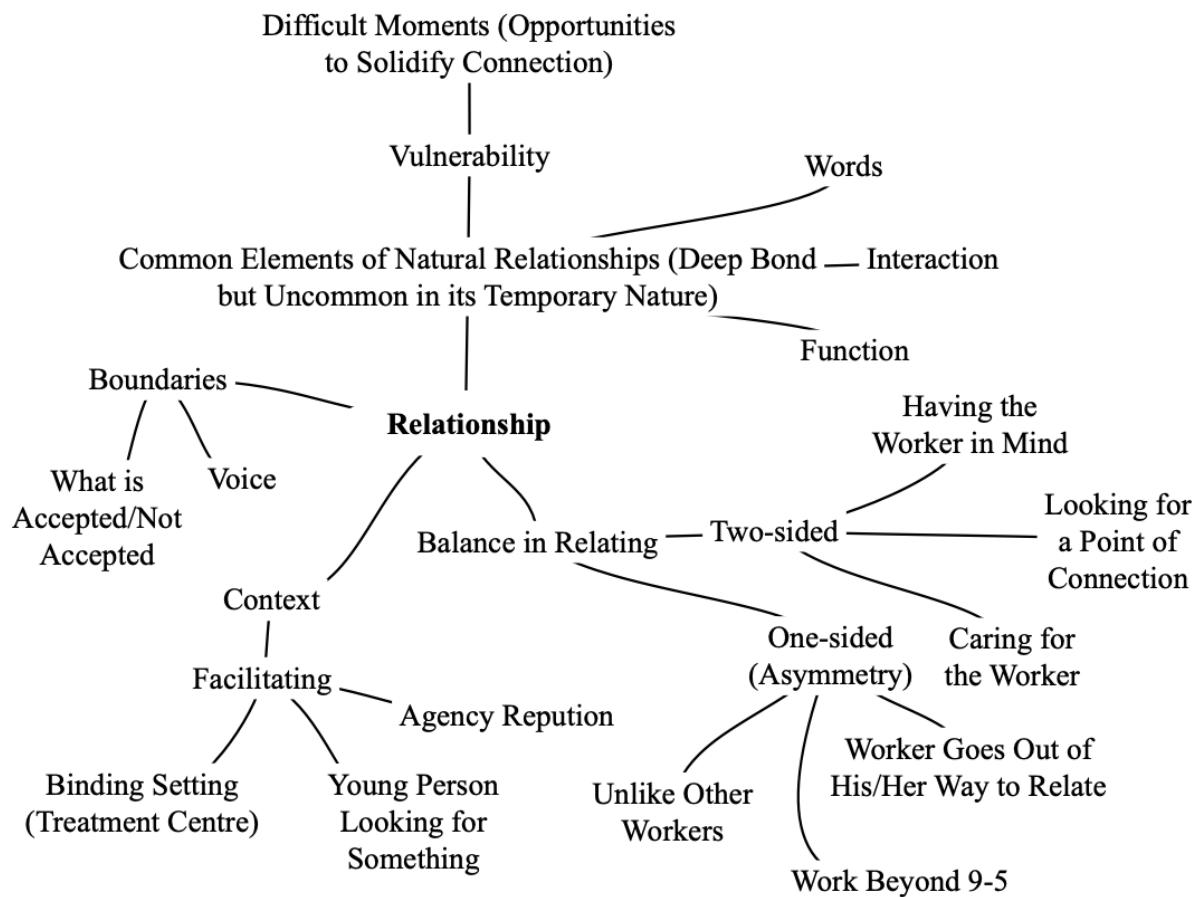


Fig. 1. Coding tree developed with an independent coder for a third of the youth sample.

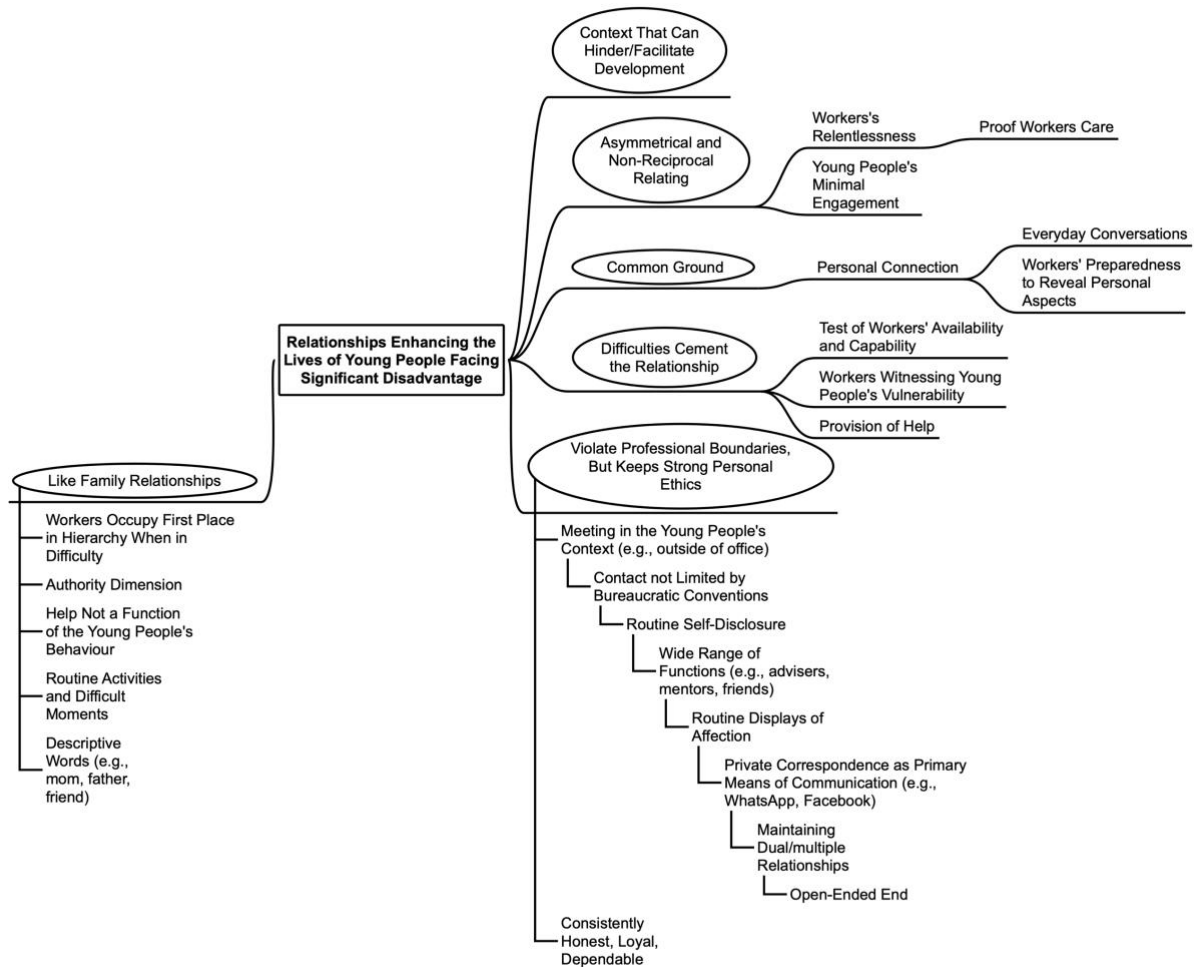


Figure 2. Final coding tree comprising aspects of professional helping relationships that enhance the lives of young people facing severe and multiple disadvantage.

Paper Three

Worthy and Able: How Helping Relationships Alter the Trajectories of Young People Who Face Severe and Multiple Disadvantage

Under review by *The Journal of Community Psychology*

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Author Note

This research is part of a doctoral dissertation and was supported by the author's previous employer, Dartington Social Research Unit. The author is grateful to the team at the Centre for the Study of Social Policy for securing access to the U.S. study organisations, data collection, and for participating in early data debriefs. The author also thanks B. Clarke and C. Sambo for technical assistance.

Abstract

Relationships with professional helpers, partly resembling family relationships, have the potential to restore the sense of worth and competence of young people facing severe and multiple disadvantage. The aim of this study was to document the mechanism by which relationships alter the lives of young people in these circumstances. Young people (n=30) and support workers (n=35) were identified by the leaders of 11 U.K. and five U.S. not-for-profit organisations providing support for this population. Thematic analysis of the semi-structured interviews revealed that relationships helped young people feel positively about themselves, disrupted their maladaptive patterns of thinking, and fostered a sense of agency in young people. The result was a self that was worthy and able. Findings provided an in-depth exploration of the notion of support in a context of adversity.

Keywords: relationships, mechanism, feelings, cognition, agency, disadvantaged young people

Worthy and Able: How Helping Relationships Alter the Trajectories of Young People
Who Face Severe and Multiple Disadvantage

This paper seeks to identify a mechanism that explains how a good quality relationship between a worker² and a young person, aged 16 to 25 years of age, facing a combination of mental ill-health, homelessness, addiction, or other major challenges, may influence the young person's health and development. Standard prevention and intervention for this group often has limited effects for a combination of three reasons. First, with a few exceptions (e.g., Bevington, Fuggle, & Fonagy, 2015), the multiple and severe nature of the disadvantage falls outside the narrow focus of many evidence-based programmes. Second, public systems are challenged by people whose needs cross administrative boundaries, so cases "fall through the cracks," with only a quarter being supported by high-end public agencies such as social care or youth justice (Hobbs, Morpeth, Ellis, & Tobin, 2019). Third, young people facing multiple disadvantages tend to avoid and disconnect from both informal and formal sources of support, masking their situation under a *veneer of self-reliance* (Kools, 1999). Recent evidence has documented the role of emotions in the process of social disconnection, with young people feeling ashamed about their circumstances, unworthy of others, and unable to correct their live courses (Sandu, 2019b, under review; Samuels & Pryce, 2008).

There is a growing body of research on how the relationships between support workers and young people in great difficulty can change the latter's trajectories (Sandu, 2019a; Drake, Fergusson, & Briggs, 2014; Trevithick, 2003), with substantial evidence that poor-quality relationships can potentiate young people's downward trajectories (e.g., Mikulincer & Shaver, 2012). The relational qualities sought by young people in professional helpers include being genuine, warm, persistent, and "like a friend" (Chen & Ogden, 2012; De Leeuw, van Meijel, Grypdonck, & Kroon, 2012; Ribner & Knei-Paz, 2002). Sandu (2019a) has attempted to integrate this knowledge into evidence about the processes that initiate, develop, and cement worker-young people relationships. This evidence highlights the family-like nature of professional helping relationships requiring different relational capabilities on the part of the worker (Sandu, 2019c).

² The term "worker" is used to describe people with variable professional training employed by an NGO to provide support to young people facing significant challenges.

This paper takes the analysis a step further by attempting to unpack the mechanism by which professional helping relationships could influence the lives of the young people.

Background Literature

Despite clear statistical correlations between quality social relationships and good health and development in diverse datasets (Cohen, 1988; Holt-Lunstad, Smith, & Layton, 2010; Thoits, 1983), there has been little research on the mechanism of change. The existing evidence rests more on theoretical than empirical foundations and has been derived more from research on close, natural relationships than on relationships between professionally trained workers and people with significant needs. However, studies of social support and therapeutic relationships can inform our understanding of mechanisms.

Relationships influence outcomes via social support. Social support has typically been classified as emotional (e.g., empathy), instrumental (e.g., practical help), and/or informational (e.g., advice) (Cohen, 1988). Research has shown that social connections can help people irrespective of whether or not they are under stress. This suggests that being connected evokes a sense of companionship and social belonging, both of which correlate with physical and psychological well-being (Berkman, Glass, Brissette, & Seeman, 2000; Taylor & Turner, 2001). For example, Sandu (2019a) found that quotidian conversations foster a sense of personal connection between young people and their workers, adding support to relational regulation theory (Lakey & Orehek, 2011). Stress-buffering effects operate when life is difficult (Cohen, 2004). Within the stress-buffering model, affective processes centred on emotions and moods play a significant role in the change mechanism (Berkman et al., 2000; Cohen, 1988; Cohen & Wills, 1985; Uchino, 2004). McCay et al. (2011), for instance, showed that relationships can help street youth strengthen their social capital and mitigate feelings of despair and hopelessness. These effects can work in tandem in accordance with the stress-by-social-integration-buffering hypothesis (e.g., Bolger & Eckenrode, 1991).

There is also evidence to the contrary. Uchino, Bowen, Carlisle, and Birmingham (2012) reviewed 30 years of research and concluded that affective or emotional processes were insufficient to explain health outcomes. They recommended more research into the role of cognitive processes in mediating the effects of relationships on outcomes, for example, testing under-utilised concepts, such as Thoits' (2011) concept of "mattering."

Feeney and Collins (2015) suggested that, in the context of adversity, relationships can serve as the means of thriving rather than simply as buffers of stress. They operationalised thriving in adversity through a series of processes that start with alleviation of

stress — by providing a safe haven — to identifying and developing strengths needed to reframe the adversity faced. Testimony from young people facing multiple disadvantage have suggested that relationships influence how young people think about themselves. A change in their sense of agency and decision-making are also implicated in the mechanism (Little, Sandu, & Truesdale, 2015). Parr (2016) found that relationships with key workers provided young and older people facing multiple and complex challenges with a supportive context that helped them restore confidence and so incentivised them to reduce damaging behaviours. Altena et al. (2017) also found that homeless young people who reported better alliances were also characterised by increases in self-determination, recommending more research to elucidate the underlying mechanism.

Relationships influence outcomes via therapy. The research on the relational component of therapy suggests other multifaceted change mechanisms, with some studies validating Bowlby's view that attachment theory applies both to the home and the clinical setting (e.g., Zeanah, Berlin, & Boris, 2011). Supportive relationships with individuals external to the family are thought to provide a context within which young people can re-define or integrate their sense of self beyond the family context (Blatt & Blass, 1990, 1996). Mikulincer, Shaver, and Berant (2013) showed that positive relationships with a therapist constituted the primary mechanism correcting clients' attachment insecurities, including those of troubled young adults (Gur, 2006; Harpaz-Rotem & Blatt, 2005). Subsequent research by Harpaz-Rotem and Blatt (2009) on the change pathways of 36 "seriously disturbed, treatment-resistant" young in-patients showed that changes in how they viewed themselves were significantly and positively associated with how they described the quality of relationship with their therapists. Changes in self-representation underpinned by emotional security is another possible mechanism by which professional helping relationships might alter trajectories of young people facing adverse circumstances.

The Relationship Healing Model developed from studies of physician-patient relationships by J.G. Scott, Scott, Miller, Stange, and Crabtree (2009) may apply beyond medicine. The model comprised three key processes. *Valuing* represents the emotional bond between the physician and patient, characterised by a non-judgemental stance, an ability to connect to the client on a human rather than at a clinical level, and being fully present in the moment. *Appreciating power* means recognising the role of asymmetry between the two parties. *Abiding* captures the extent to which the medical professional demonstrates commitment to the patient. From these processes, the patient builds trust, hope, and a sense of being known.

Additional considerations. Social influence and social control are two additional pathways through which healthy relationships may be linked to positive outcomes. Social influence is the way in which individuals understand and copy norms of behaviour (Festinger, 1954; Marsden & Friedkin, 1994). This mirroring has been found to influence a range of health behaviours such as exercising or tobacco use (Landrine, Richardson, Klonoff, & Flay, 1994). Social control can be direct (when, for example, a daughter encourages her mother to take her medicine) or indirect, through exposure to social roles — e.g., parent, friend — that implicitly influence behaviour (Rook & Underwood, 2000) and can explain differences in behaviour in front of a parent as opposed to a schoolfriend. Self-evaluation of performance in specific roles affects self-esteem, sense of control, and mastery, all of which influence health and development (Baumeister, Campbell, Krueger, & Vohs, 2003; Mirowsky & Ross, 2003; Taylor & Stanton, 2007).

Question, Hypothesis and Method

The present research sought to identify the mechanism that links a professional relationship between a worker and a young person facing severe and multiple disadvantage and an alteration in the life trajectories of the young people. Given the complexity of circumstances that produce disadvantage, the varied emotional reactions involved (Kools, 1999; Samuels & Pryce, 2008), and the rich nature of their relationships with their workers (Sandu, 2019a; Parr, 2016), a multifaceted, non-linear, mechanism was hypothesised. The attachment-like nature of young person-worker bonds (Sandu, 2019a) and the value that young people assign to workers to whom they build personal connections (Sandu, 2019a) suggest that affective processes, altering how young people felt, should play a role. However, in line with Feeney and Collins' (2015) work on social support, it was predicted that the sense of a safe haven produced by the relationship would be a building block, not an end point, in the change process. Processes that altered the cognitive understanding of past negative experiences or promoted a sense of agency were also predicted to play a role. The experience of a good quality relationship was hypothesised to change the self-perception of the young person (Harpaz-Rotem & Blatt, 2009).

Sample

The sample included 30 young people and 35 workers from 11 U.K. and five U.S. organisations that provided support to young people who were homeless, involved in gangs, Gypsy and Traveller, misusing substances, or excluded from school, matching the diversity of severe and multiple disadvantages previously studied.

Young people (see Table 1) had the following characteristics: were aged between 16 and 25; had experienced one or more risks to health and development, including abuse or neglect, poverty, and substance misuse; had manifested significant impairments in health and development, for example challenging behaviours, crime or mental ill-health; had been supported by a voluntary or not-for-profit organisation for at least six months; had improved relative to their situation at referral; and had formed a significant positive relationship with a worker in the organisation.

[Insert table 1 about here]

Workers who took part in the study (see Table 2): had a job role that involved supporting young people (e.g., therapist, counsellor, youth worker, or volunteer); were considered by leadership and peers to be exemplary in relating to young people; and had been repeatedly identified by young people as someone with whom they had formed positive relationships.

[Insert table 2 about here]

Procedure

Access to young people with multiple disadvantage is limited so the recruitment strategy was purposive, selecting participants via voluntary or non-profit organisations in the United Kingdom and United States set up to provide support to young people in these circumstances by using the author's professional networks. The interest in the role of relationships for this population and the access to organisations provided a unique opportunity to conduct the study in both countries. Leaders of each organisation were asked to nominate young people and workers according to the characteristics described above.

Interviews — audio-recorded, lasting between 45 minutes to 1 hour and typically conducted on the premises of the organisations to ensure the comfort of young people — used questions based on themes drawn from the research literature reviewed above. The Author conducted all the U.K. interviews and helped the U.S. research team finalise the second set of interviews. The final protocols were approved by an ethics committee in each country. Pilot visits were undertaken, one in each country, to assess the suitability of the instruments, resulting in minor changes related to the order, rather than content, of questions (see Table 3 and Table 4).

[Insert table 3 and 4 about here]

Analysis Strategy

The analysis was informed by a critical realist approach (Willig, 2013), meaning it was designed to capture what happened in the relationships between young people and their workers. The researcher, in a detective role, unpacked the relationship processes, trying to understand the behaviour, thinking, and motives of the participants. A second position from Willig was to explore the phenomenological elements and the subjective experiences of the participants regarding what they felt and did in the relationships.

The data were analysed using Braun and Clarke's (2006) six stage thematic analysis approach. It starts with data familiarisation, code generation, searching for themes, reviewing them, defining and naming, and finally writing the report. Transcripts were coded paragraph-by-paragraph, starting with a list of pre-defined codes but developing new ones as needed. Semantic as well as latent themes were coded. Each theme was selected based on its frequency and relevance to the research question. The analysis was conducted using NVivo11.

Following guidance from Lincoln and Guba (1985), interviews were reviewed in a series of meetings by a team of collaborators working on analogous studies to discuss emerging perspectives and potential biases. Analysis was triangulated at source level (through the views of young people and helpers), at analyst level (through initial coding of data), and through inter-coder reliability of emerging codes between an independent coder (MSc student) and the Author in which agreement was tested on a third of the youth sample and was found to be high (Cohen's kappa = 0.76). These checks generated further insight and several changes to the coding framework. For example, it was unclear in some instances whether recovery was attributable to the relationship or other contributing factors, such as a stable housing arrangement or additional interventions such as Cognitive Behavioural Therapy (CBT), so a new theme "ambiguity in mechanism" was created to capture potential variations. The author kept a reflexive journal of the coding process, recording summaries of case studies, changes made to the analysis strategy, and other noteworthy details.

Variations in the findings were identified in three ways. First, a deviant case analysis, comparing a typical case with one that deviates from the pattern, revealed differences explained by sample selection, definition of severe and multiple disadvantage, and the young people's abilities to reflect. Second, once the primary themes had been established, the

sample was divided into two subgroups: those with reasonable and low-quality relationships. The analysis strategy was then repeated on both subgroups, indicating that data fit was represented to a higher degree by participants with low-quality relationships. Third, an external auditor scrutinised the raw data, examining the way in which data were synthesised, how themes emerged, and how these were linked. He also looked at the process notes and reflective journal to see how decisions or dispositions were captured. The auditing concluded that there was consistency between the emerging themes and the raw data.

Findings

The data (see Figure 1) indicated that relationships between young people and their workers:

- helped young people feel good about themselves and express their emotions (opened up emotions)
- disrupted, gradually and directly, their maladaptive patterns of thinking (broadened cognition)
- enhanced the young people's sense that "I can do things differently" (promoted agency)
- therefore, enhanced the young people's sense of self (allowing them to perceive themselves as worthy and able), and
- encouraged them to expand and alter their social networks (seeking relationships that reinforced the positive relationships with their workers).

[Insert Figure 1 about here]

Feeling Good Things (Opening up Emotions)

Prior to the relationships with their workers, the young people felt unworthy and unable. This self-evaluation stemmed from the shame of being serially let down by those who promised to help (Sandu, 2019b, under review). The young people "guarded" themselves from others, making access to their emotional lives difficult.

Relationships with workers broke through these barriers in two ways. First, they made young people feel positive about themselves. Second, they helped young people express what bothered them.

(a) Feeling good things. The young people wanted to feel normal by having a sense of being like everyone else. Their backgrounds were atypical. They had dealt with risks

such as drugs, gangs, and mental ill-health. They had endured extensive involvement with professionals whose duty was to assess and intervene. Whatever the value of this activity, it left the young people feeling different. Unsurprisingly, they valued relationships with those who accepted them for who they were.

The workers in this study built common ground (Sandu, 2019a) through everyday conversations dealing with shared interests and by encouraging young people to avoid threats to health and development. Ordinary conversations allowed the young people to see their workers as humans, not just professionals.

F412: He (the young person) said to me: "I feel comfy coming here. It's just like nice having a conversation, having a chat with you; you know, it's not all about the doom and gloom." He meant it's not all about his troubles. (Worker, United Kingdom)

Gradually, the young people came to feel understood and accepted. The first reference to the challenges they faced were prompted by workers revealing aspects of their own lives.

X004: He (worker) knows what's going on. He's been through the struggle. He's been through what we're going through now. When I speak to him, we understand each other. He gets what I'm saying, and he knows what to tell me and give me advice about how to take care of the situation. (Young person, United States)

W001: She accepted me for who I was. It wasn't because I'm [name young person], she threw me in the corner, or she judged me, or anything. She accepted me as who I was, and how I came into high school, and worked with me. (Young person, United States)

H301: Around (worker), I can just talk to her about stuff, and then just like, be. Like, no matter what mood I'm in, I can be bouncing off the walls or I can be crying rivers or tears, like, I can do that around (worker), no matter what mood it is. Like, I can be myself. (Young person, United Kingdom)

The young people routinely tested the workers' commitment, often over an extended period.

Y001: I lived at (location) for a year and half and stayed out there for another six months, so about two years I stayed out there. You're still contacting me, worrying

about me, calling me to say I'm just thinking about you. Are you okay? (Young person, United States)

Workers responded consistently, sending “welcome home” cards when young people got rehoused, gifting books they might like, or remembering how the young people liked their coffee. These small acts of kindness made the young people feel special.

X001: I got this card for you, the little goodies they have and all that extra stuff, somewhat with that, but just them being on my back showing they care, them wanting me to do better in life. Just don't settle for less in life. Be the best you can be, honestly. (Young person, United States)

H411: I remember what drink she liked; she likes a mocha with three sugars. Even just that, little things that your family or your friends should know about you, it's those subtle things. She moved house and I gave her a moving in card. Again, it was like I'd given her a million pounds. (Worker, United Kingdom)

The young people came to sense that they mattered to the workers. They felt their workers were willing to invest, to keep coming back to, and to fight for them.

H411: I can be there in those meetings because she didn't have anybody there to support her. I can come to that meeting with you; that must be really difficult being in the meeting, you've had your children removed and people are all sitting there reading horrible things about your reports and why they've been removed so any shame, guilt, grief or trauma is just going to be amplified in those meetings. I'm there to help you, to support you. (Worker, United Kingdom)

(b) Expressing the upsetting emotions. The regained sense of normality was the foundation on which young people began to open up in front of their workers. They shifted from guarding to revealing their sense of being unworthy and unable.

The process of revealing demanded that workers were continually available and able to suspend judgment.

Y003: I just called her to confide in her because I had lost my little sister. She was part of (agency), too. We had the same caseworker, which was (worker). I called (worker) at 12:00 midnight, crying to her about it. She was hurt because it was her

client, too. It was just crazy. She had my back on that, though, and I appreciated that. (Young person, United States)

G301: I was in hospital after taking an overdose. She came and visited me. And I just sobbed my heart out to (worker), and I was telling her things and saying things that I'd never really said out loud before. She was just there and she, you know, she just held, like held me and let me cry and let me say it and she didn't interrupt me or nothing. She didn't judge me. She didn't tell me off. She just let me get it out. (Young person, United Kingdom)

Gradually, workers became what the young people described as their “emotional outlets,” the channels through which they offloaded emotions mixed up in the breakdown of past relationships, bereavement, and shame. The young people’s venting or offloading happened in ordinary settings, for example while riding in a car with their worker at the wheel, but could be accelerated by moments of crisis.

Z111: Letting him come to me with what he is interested in and experiencing and dealing with and just kind of asking questions around it to help kind of guide him too. Some of them were pretty heavy things like he’d be really philosophical like asking me about you know, can you be redeemed for things you’ve done in the past? How can you ever put grief away in an effective way where it doesn’t continue to keep coming back and impacting you? (Worker, United States)

W002: Yes, because every time I had a problem, I used to go to him and talk to him about that problem. He just made me feel more — better, and I went throughout my day. (Young person, United States)

Disrupting, Gradually and Directly, Maladaptive Patterns of Thinking (Broadening Cognition)

Extended disadvantage, including frequent relationships breakdown, led young people to develop maladaptive patterns of thinking, including deep suspicion about new relationships (Sandu, 2019b, under review; Kools, 1999). This template shaped their initial interactions with workers as illustrated in phrases such as: “If I make a mistake, I lose the people in my life”; “If I show who I am, I will get hurt”; or “If I invest in this person, they will disappear.”

The workers disrupted these expectations by defying their underlying tenets and confronting their logic.

(a) Defying the tenets of failed relationships. An acute sense of others built from previous failed relationships allowed the young people to recognise that their workers did not behave according to their expectations.

H301: She reassured me that she wasn't going to go anywhere. No, because a lot of social workers that've worked with, all my social workers, they don't really stay longer than six months, and then they leave. And it's really unsettling. (Young person, United Kingdom)

A301: It doesn't matter how many times you disappear. I will turn up as long as you want me to turn up. Do you want me to keep doing this, (young person)? And he said, "Yes, okay." And then at some point he started phoning me. (Worker, United Kingdom)

There were interactions with workers that young people described as "first times," novel experiences such as being believed and cared for, hearing that things could change for the better, and having someone to turn to in difficult times.

G301: And I was in a really, really dark place, and I think she was just the first person that's really ever showed any like belief in me or interest in me. (Young person, United Kingdom)

W005: He's (worker) been that one person that actually been really consistent in my life, and if it wasn't for him... I don't know where I would have been. I probably would have been stuck somewhere, maybe. (Young person, United States)

Although workers related to the young people as they would to others, they appeared to the young people to be different.

X113: Some of these young men have never had someone show up when they fail. They start to have this extreme thinking of, "I'm a failure. See?" If they're not answering phone calls or whatever, we're still knocking on doors and showing up, and we're letting them know, "It's okay. That's a part of real life, failure. There's nothing wrong with you. You're not a failure." (Worker, United States)

The conversations between the workers and young people referenced this reflection. Workers talked about how they behaved with others or what it means to be a man or a woman. They expressed their opinions about the world. They modelled normative behaviour.

F412: Challenging him a lot, on certain things he believed, about himself, about the world, and, you know, he had a really very negative outlook on the world, and certain beliefs he held. So, not being afraid to get into things and having conversations, having little debates. That's what he used to say, "I'm coming down to have a little debate with you. You know, because you set my head straight at certain things." (Worker, United Kingdom)

(b) Confronting the logic of failed relationships. Cursing, screaming, not showing up for appointments, or appearing under the influence of drugs were regularly used by young people to test how workers would respond. As well as disconfirming the young people's expectations, the workers exposed young people's doubts.

The workers displayed a "sharp empathy," involving astute assessments of young people's behaviour designed to elicit positive responses. Initial gentle questions gradually evolved into direct rebukes.

Young people and workers used words like "not babysitting"; "not sugar-coating"; "not feeling sorry"; "getting straight to the point"; "never holding anything back"; "not pussyfooting"; and "not beating around the bush" to describe sharp empathy.

Z112: I think, for me, one of the things I found, I'm kind of a blunt, honest... I'm not the super-nurturey, soft and, you know, sugar-coat-everything person. That's not my style. (Worker, United States)

G302: With (Worker's name) it was straight to the point. So that's where I knew I could trust her because she would tell me if I was in the wrong. She would tell me if she didn't like certain things so that's where I knew I could trust (Worker's name) in that way. (Young person, United Kingdom)

Sharp empathy involved workers being direct about a single subject while avoiding a global judgement of the young people.

F301: The way she (worker) spoke to me I thought she was a bit of a bitch, yes. Sorry to swear, like, but that's what I thought at first, and then I just couldn't get my head around her, do you know what I mean? (Young person, United Kingdom)

H301: She doesn't give me that impression, that she's, like, you know, like, I feel so bad for you, like you've had such a hard life. She's not like that. She's more like, just get to the point sort of thing, like, no beating around the bush. Like, right, you've had a hard life. But we're going to do A, B, and C, and I'm going to stand by you and we're going to do it. Do you know what I mean? It's none of that pussyfooting about, like, oh, I'm so sorry, I'm so sorry. Like, I couldn't have that person like that working with me. (Young person, United Kingdom)

The sharp empathy required young people to engage with aspects of themselves that they disliked. In mature relationships, the workers dug deeper and asked about the sources of shame and anger.

Z001: I just remember like (Person01) and me in the back of class H and (Person01)'s like, what are you doing man? And I was like punching this piece of wood and he was like, why are you doing that? And I was like, I'm mad. And he was like, why punch the wood? You know, he's just trying to — you know, doing that thing where it's not so much that he's trying to figure out why I'm mad but he's trying to get me to figure out why I'm mad, you know? (Young person, United States)

F412: Sometimes you've just got to be, you know, down the line and straight and I think, one way is, you know, "Have you got washing powder?", "Are you able to wash your clothes?", and stuff like that. "How are you keeping your room?" You see, I'll 100% do it, because it has to be done, and it's part of the relationship. Sometimes it's awkward, it is awkward. (Worker, United Kingdom)

Sharp empathy was also evident in the placement of boundaries, with workers refusing to see young people high on drugs, not accepting abuse, identifying lies, and refusing to do for young people what they could do for themselves.

F301: I'd be like outside where I was living in the hostel and I'd be like outside smoking a joint or something like that and she'd come out — what are you doing? Know what I mean, she'd go, my office is there, all I can smell is your silly wacky

baccy and all of that and then she'd come out and flip, basically, and be like, go around the corner or go somewhere else because it's not a nice smell for us so I said fair enough. (Young person, United Kingdom)

X111: "Listen. The only thing that I ask for you" — the other thing is I tell them, "The only thing that I ask for you is to be honest with me." I always give the example, like I say, "Say you have a drug problem, and I'm asking you, 'Hey, how you doing with your substance?' If you tell me that, 'Oh, I haven't been smoking. I'm doing A, B, C, and D. I'm doing well,' then I wouldn't know. Then we're going to be talking about something else that's different, like, 'Hey, so what about work?' If you tell me that, 'You know what? I've been using,' then we could actually have a real conversation and address the issues." (Worker, United States)

There was a moral facet to sharp empathy. Workers did not see their role to be soft, nice, pleasing, or be liked by the young people. Holding difficult conversations was a moral responsibility.

F411: It's not about him liking me or being popular with him or...It's about whatever guidance that, you know, we think is right for you. So you going to get that and, you know, some people sort of, you know, bounce off and you won't see them for a bit, but then they come back. Because they don't like what you said, but then after giving it thought they know that it's the right thing that we have said because they know...They get to know that their interest is sort of at the top of the list for us. So we're not really in it to, you know, be liked or be the best worker. (Worker, United Kingdom)

When the foundation of a strong relationship was in place, young people recognised the value of hearing difficult things; it contributed to the respect they felt for their workers.

X002: I think it's because she tells me what I need to hear. (Worker)'s not going to sugar-coat anything. She does it in a nice way. Some people can't tell you what you need to hear in a nice way. She can kind of do that. She'll say it stern and let you know what it is, how it is, and in the same breath tell you what you need to do. (Young person, United States)

The Sense of "I Can Do" (Promoting Agency)

The relationships with the workers instilled in young people a sense that if change were to happen, the decisions they made for themselves would be fundamental. The data revealed a three-step process by which the relationships activated the young people's agency — exposure to opportunities, trying, and experiencing the result — applied to a range of actions, from small and trivial (e.g., having a conversation with someone) to major (e.g., getting a job).

Consistent with the literature on working alliance (Elvins & Green, 2008), workers asked the young people what they considered to be the priority for change. Immediate challenges — how to hold conversations, secure travel passes, schedule appointments, and get back into school — dominated the early stages.

The workers routinely exposed the young people to a series of opportunities to exercise agency, efforts described by the young people as “pushing,” “motivating,” and “suggesting.”

X001: Just from them making me, pushing me, just being on my back. Doing classes, do the circuit training. (Young person, United States)

F412: Just to go out and try things. There's more to life, there's more to you, there's more to the world than sitting in our room, sleeping all day, and self-harming, because you're miserable, and you just feel crap about yourself. (Worker, United Kingdom)

When young people tried these opportunities, the workers held them to account by monitoring, checking in, reminding them of things they had to do, and validating their progress. These actions were described by young people as “keeping tabs,” “giving advice,” “checking on me,” or “being on my back.”

X002: When she sees I'm doing better, she tells me all the time before I notice it. She'll come out of the blue and be like you just got this, you just got that. You're so close to getting this. Stay on it. I'll be like okay. I didn't even realize that. (Young person, United States)

K303: He used to like keep tabs on us. He would like call us and see how we are, text us. And if there were job interviews, like, or screenings like we were pushed to go towards, he would like, you know, check up on us, that we're actually going to it and things like that. (Young person, United Kingdom)

Success encouraged the young people to seek further opportunities.

A411: I think you're creating a space in which people can explore and think about possibilities, and again what you are trying is to have little success in the process so to build the confidence. (Worker, United Kingdom)

Y003: I just started going back to school this year, and I didn't want to go back because I still got so much on my plate right now. (Worker) told me I better not do it. I better not drop out. I need to finish it if this is something I want to do. By her pushing me, it kind of gave me that boost. Now, as we speak, I'm still in school, so I haven't gave up yet. (Young person, United States)

Recovery of Self: Young People Perceiving Themselves to Be Worthy and Able

By opening up, expressing feelings, changing the way they thought about the world, and regaining a sense of agency, the young people recovered their sense of worth and ability. This process of recovery was non-linear. Changes in one component of the model disrupted the others. The order in which the mechanism worked changed from case to case, sometimes starting with the agency, sometimes with the opening up of emotions.

Progress was more evident in the young people's sense of self-worth, of being more accepting of who they were, than in the reduction of or coping with risk. They started to like themselves. They began to feel they mattered. They asked for help when they needed it. They stopped hiding.

F411: I mean you can tell by people's sort of body language. You know, people's... It's kind of... We stand taller when we've got something, you know, and then are in the system and they got their own front door and you know, even having people in their lives who are really important to them. They've got like a bit of a different stance. I think they start liking themselves and seeing, you know...Here I am, worthy of stuff, here I am decent. (Worker, United Kingdom)

There were five markers affecting the young people's sense of competence. The first was more control over their emotions and behaviour. Second, the young people no longer felt controlled by their diagnoses. Third, they became proactive, not fearful, of life. Fourth, they adopted a positive outlook and took responsibility for achieving their goals. Fifth, the young people assumed self-confidence and felt able to get involved in daily life.

X002: My patience. I've got so much patience now. I used to flip out. I couldn't hold my tongue. Now when somebody's disrespecting me, a big golf ball just goes in my throat. I just can't saying anything. Nothing needs to be said. My values start kicking in. I start thinking about classes. When I first started, I remember when I used to black out. Today we can argue and I'll leave the building and go home. I'm going to be thinking all night I should have done this, I should have done that. I'll probably call in the morning and apologize. (Young person, United States)

H302: Well, I still hear them (voices), but they don't hurt as much anymore, but they're sometimes, even though I'm stronger now, they sometimes will say something, I get really upset, like really upset. And then once I... I do get upset sometimes, but I think that's normal, but I don't get as upset as I used to. I don't feel like suicide. I just feel like distraught and I need someone to talk to. (Young person, United Kingdom)

X001: Back then, when I first came here, if she asked me to do something like this, I would be like no. Why do I got to stay and do this? I don't get paid. I don't do this. Now, I'm to the point where I'm like, shit, let me try it. You never know what you're going to get out of it or what you're going to learn from it. (Young person, United States)

F301: Like, I've learnt a lot from her and back then I was a weed smoker and crazed lunatic who thought he was just running around just surviving basically to being a professional in a job on a five-year contract. (Young person, United Kingdom)

Z001: And then it's actually now when I think about my future, I actually think about it like, hey well, you know, I don't know for sure what's going to happen but it's up to me what's going to happen and it's not just going to be some disastrous thing and now I can look at things like that without just freaking out. Which is pretty nice. (Young person, United States)

Change in Social Networks

Experiencing a good quality relationship with their worker and changes in self-perception had consequences for the young people's approach to wider social relationships. They were better able to listen, to communicate, to trust, and to ask for help when needed. Young people cut negative ties in their lives and worked on mending healthy past ties. While

retaining a sharp sense of others' potential to harm, they were now aware of others' signals of potential to help. They sought out others whose relational capability reinforced gains they attributed to their workers.

Y003: I wasn't a good listener back then, but (worker) helped me to listen. Excuse me. I wasn't a people's person. I was kind of to myself. If I wasn't with my twin sister, I was kind of to myself. I really didn't talk to people. (Worker) kind of helped me get over that when I first entered the program. (Young person, United States)

H302: I don't have friends anymore. I cut them all off when I moved. I don't talk to any of them. I occasionally... If I bump into somebody, I'll say hello, have a little conversation. Someone texts me, I will text back. But as it comes to going out, meeting up, things like that, I keep myself to myself. And that's what I need to do to carry on in the track that I'm going until I feel stable enough to be able to introduce people with problems back into my life without them bringing me down again. (Young person, United Kingdom)

Discussion

This study described a mechanism by which relationships with a worker appeared to alter the lives of young people facing severe and multiple disadvantage. It documented how relationships helped young people feel positive about themselves, challenge maladaptive patterns of thinking, open up new possibilities, and foster a sense of agency. This process could lead to a recovered sense of self and seeking other relationships that mirrored those developed with the workers.

The study suggests a multifaceted mechanism of how relationships operate in a context of adversity, highlighting how affective, cognitive, and agency-promoting processes work to change young people's trajectories. Affective processes, influencing young people's emotional functioning, appeared to operate in two ways. First, they helped socially re-integrate young people by creating an environment in which they felt normal and valued despite their atypical circumstances, adding support to Bolger and Eckenrode's (1991) buffering-stress-through-social-integration hypothesis. Second, relationships acted as buffers against the external stresses when young people made explicit requests for help from their workers, mitigating, as found by McCay et al. (2011), feelings that could weigh them down heavily.

As predicted by Feeney and Collins (2015), emotional security was a building block for further change. Workers helped young people think and act differently, underscoring Uchino et al.'s (2012) call for more research on wider mediating processes in the relationship-outcome link. Thus, the study provided empirical support for Feeney and Collins' (2015) observation that relationships do more than mitigate stress in the context of adversity.

The putative process by which young people changed their thinking built on the findings of Harpaz–Rotem and Blatt (2005, 2009). Troubled young people's mental representations undergo a process of self-revision as a result of the relationships they developed with the workers. The data highlighted the role of workers displaying relational capabilities (Sandu, 2019c) that contrasted with the young people's past experiences. Worker's direct intervention, via sharp empathy, also played a role, prompting young people to reflect on maladaptive experiences. Harpaz–Rotem and Blatt (2009) found analogous results when relationship quality and treatment were both considered. In this study, relationships were the treatment. The common thread seems to be the attachment underpinning worker-young person bonds.

Previous research has explained the linear relationships between social control and behaviour change (Tucker, Orlando, Elliott, & Klein, 2006). This study revealed a more complex picture. The support offered by the workers in this study addressed challenges specific to each young person at successive moments in time. In certain contexts, the workers' empathy was sharp, calling out unhealthy thoughts and actions. Consistent with Hughes and Gove's (1981) dual effect model, responses to sharp empathy in this study comprised initial negative affective responses (e.g., feeling uncomfortable), occasionally followed by negative behaviours (e.g., withdrawal from workers), eventually switching into positive behavioural and affective responses (e.g., re-engaging with and strengthening respect for the workers).

The agency fostering process revealed in this study adds to our understanding of the relationship-self-determination link highlighted by Altena et al. (2017). Workers continuously exposed young people to opportunities where they could exercise their agency and enjoy the result of their participation. This could be an illustration of how implicit social control — typically advanced in research on personal relationships — could apply in this context. Specifically, by tracking their progress, workers switched young people's points of comparisons with self from others in a reference group (Mead, 1934) to themselves at

successive stages in time and to the self they wanted to become. This promoted young people's sense of agency and translated into a higher self-esteem and self-worth.

The findings reflect the importance of social support particular to the context. Workers understood, valued, and therefore prioritised informal interactions over directly resolving challenges. Social support in this context, reflecting the work of J.G. Scott et al. (2009), started with persistently engaging young people in ordinary conversations and continually responding to the detail of what was said. As Lakey and Ohrek (2011) argued, these quotidian interactions helped young people to recover a sense of normality and feel positive about themselves. Bolger, Zuckerman, and Kessler (2000) call this invisible support through day-to-day conversations, which this study showed was a prerequisite for young people making explicit requests for help when in difficulty.

The process of developing these deep family-like relationships with their workers and the reward of a sense of worth and competence recovered, encouraged young people to seek out similarly fulfilling connections and to back away from relationships that failed to buffer stress, echoing McCay et al.'s (2011) observations.

There are several limitations to this study. With respect to the mechanism presented, the data revealed two confounding and two inhibiting components to the mechanism that could not be fully unpacked with the available data. First, young people formed relationships with people other than their workers. Second, some agencies offered treatment methods such as CBT, in addition to the relationship with the worker. Third, progress attributable to the helper-helped relationships was frequently offset by other negative relationships, for example with gang or family members. Fourth, severe mental illness or impaired cognitive ability could limit the impact of the relationship with the worker. It is difficult to generalise from a sample that comprised young people and workers selected because of the perceived success of their relationships. Future research should explore cases where the proposed mechanism operated but impacts were few (or impacts were present in the absence of the mechanism for change). The study was retrospective, looking back over the life of the young person and thus did not look forward to see if the gains made — changes in cognition, agency and a widening of social network — were sustained.

Policy and Practice Implications

Most policy makers seek outcomes such as improved mental health or reduced homelessness. The practitioners in this study did not think in terms of these types of outcomes. Success was counted as getting the best — as defined by the young people,

ranging from making new friends to securing a roof over their heads to getting a job — for those they support (in much the same way as they would seek the best for a family member). Although not set up to measure improvements in mental health, the young people in this study described themselves as being able to play an active part in the world and worthy of attention from others. It is arguable that these gains are the most important for young people facing severe and multiple disadvantage in that they can create the conditions for resilience. If verified, this has important consequences for the investment of scarce public resources.

The findings point to different ways of supporting young people faced with very difficult circumstances. First, shifting from a clinical — where the focus lies on helping young people overcome past trauma — to a normative approach — that takes into account past experiences but also considers and treats young people as individuals who want to be seen beyond their disadvantage, who crave friendships, or engagement in pleasant activities— can be beneficial. Second, selection of staff needs to match the type of support needed. Being able to relate and promote change in young people in the ways described above might involve re-thinking of orthodox rules of conduct in professional helping relationships. Third, the organisational context in which staff operate needs to be conducive to forming healthy relationships.

The study supports the value of incorporating the sense of self into conceptions of well-being. Outcome frameworks produced by policy makers tend to focus on objective assessments of human development, such as being economically active, being engaged in learning, or having a healthy mind. This study showed how individuals' assessments of their own abilities and worth, potentially independent of these objective facts, contribute to the recovery process and in some cases represented recovery.

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Table 1
Youth Sample Demographics and Characteristics (N=30)

Age range	16-25
Gender	
Male	18
Female	12
Reported housing difficulties	9
Reported mental health disorders	8
Reported emotional regulation difficulties	13
Reported self-harm (three attempts to commit suicide)	5
Reported substance misuse	5
Reported difficulties with education	11
Reported loss of family members (two murders)	5
Reported involvement with social care system	7
Reported involvement with criminal justice system	8
Social network	
<i>Social support</i>	
Perception of availability of someone to rely on	
Yes	5
No	20
<i>Composition</i>	
Positive ties	
Absence	7
Limited (one person)	9
Two or more people	9
Negative ties	14

Note. The characteristics above were mentioned freely, and were not elicited by the researcher, during the interviews. Given the young people's support from agencies that deal with populations with severe and multiple disadvantage, the actual number of risks they faced is likely to have been higher.

Table 2

Worker Sample Demographics and Characteristics (N = 35)

Gender	
Male	10
Female	25
Professional qualifications*	
In social sciences	20
Other fields	1
No higher education	4
Role in the agency**	
youth worker	7
outreach worker	4
program manager	4
mental health worker	3
development worker	2
case worker	2
key worker	2
practitioner	2
case manager	2
support worker	1
therapist	1
link worker	1
family support worker	1
teaching assistant	1
youth coach	1
project coordinator	1
Reported years of experience of supporting people with multiple and complex needs	
1-5	12
5-10	10
Over 10	8

* Not all workers spoke about their professional backgrounds in terms of their professional degrees.

**The diversity in worker labels reflects the fact that their support-providing role is not clearly defined in this context.

Table 3

The Structure of the Interview Protocol for Young People

Sections interview	Topic
Part I: Introductory chat	Young people identify someone working at the support agency with whom they had a relationship that was important to them
Part II: Relationship with the worker	First impression Development of the relationship Turning points/ Positive and negative moments Worker qualities that contributed to/hindered the relationship Young people's qualities that contributed to/hindered the relationship 1 (never) to 10 (always) number exercise on key elements in relationships (e.g. trust; care) and follow-up with an example Short description of other meaningful relationships in the young people's lives
Part III: Life changes over the course of the support from the agency	Changes in the young people's life since they started coming to the support agency Follow-up questions about how young people explained such changes
Part IV: Self-perception	Self-description, current and past Sense of control and sense of pride, current and past
Part V: Conclusion	Advice for essential worker qualities in supporting young people in these situations

Table 4

The Structure of the Interview Protocol for Workers

Sections interview	Topic
Part I: Introductory chat	Workers identify a young person with whom they formed a positive relationship and helped to improve their situation.
Part II: Relationship with the young person	<p>The beginning of the relationship</p> <ul style="list-style-type: none"> Description of the young person and their situation Factors that contributed to/hindered the relationship Goals for change for the young person <p>The middle of the relationship</p> <ul style="list-style-type: none"> Progression of the relationship Positive changes in the young person and reasons for it Turning points in the relationship <p>The end of the relationship</p> <ul style="list-style-type: none"> Signs for when the worker was no longer needed Worker's role in the young person's progress Factors that hindered the young person's progress Changes in emotions and agency of the young person Description of the worker's current relationship with the young person
Part III: Workers' ability to support young people in difficult situations	<p>What workers do when they relate to young people</p> <p>Personal and professional qualities involved in relating to young people and their development</p> <p>Ways in which relationships with young people benefit workers</p> <p>Emotions associated with supporting this population</p> <p>Reasons for when the relationship does not account for progress in the young person</p> <p>How the support agency supports/hinders the workers' ability to relate</p> <p>Ability to form and maintain several relationships</p> <p>The role of shame in this population</p>

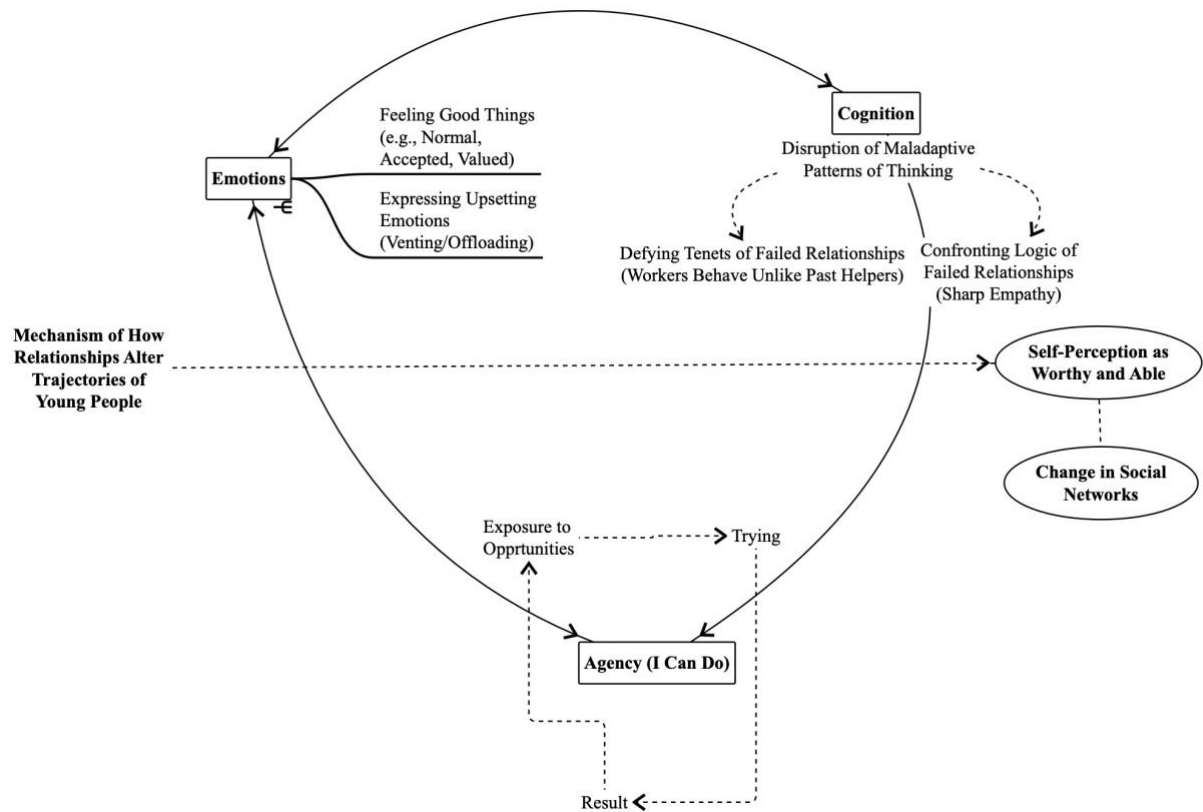


Figure 1. The path by which successful professional relationships alter trajectories of young people facing severe and multiple disadvantage.

Note. Square shape boxes are portraying the three main components (and their underlying processes) of the mechanism of change; eclipse boxes represent the result of experiencing a good quality professional helping relationship.

Paper Four

What is the Profile of Workers Who Build Effective Relationships With Young People Facing Severe and Multiple Disadvantage?³

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Author Note

This research is part of a doctoral dissertation and was supported by the author's previous employer, Dartington Social Research Unit. The author is grateful to the team at the Centre for the Study of Social Policy for securing access to the U.S. study organisations, data collection, and for participating in early data debriefs. The author also thanks B. Clarke and C. Sambo for technical assistance.

³ Sandu, R. D. (2019c). What is the profile of workers who build effective relationships with young people facing severe and multiple disadvantages?. *Journal of Community Psychology*, 1-18. doi: 10.1002/jcop.22256

Abstract

Family-like professional helping relationships have the potential to alter the trajectories of young people facing significant disadvantage. This study seeks to identify the worker attributes that allow the formation of deep bonds with young people in these circumstances. Access to young people in difficult circumstances was secured via organisations that provided support to this population. Interviews about positive helping relationships were conducted with young people (n = 30) and support workers (n = 35) from 11 U.K. and five U.S. not-for-profit organisations. Thematic analysis was used to analyse the data. Three sets of worker qualities were identified and linked to how relationships change young people's trajectories in a context of adversity. This study has implications for the selection, training, and support of workers who provide support to young people facing difficult challenges underscoring the qualities needed to provide support and change young people's outcomes.

Keywords: disadvantage, young people, relationships, profile of workers, change, support, trajectories

What is the Profile of Workers Who Build Effective Relationships With Young People Facing Severe and Multiple Disadvantage?

Family-like supportive relationships between young people facing severe and multiple disadvantage and workers⁴ have the potential to restore young people's sense of worth and competence. Young people's ability to feel positively about themselves, alter maladaptive thinking patterns, and regain a sense of agency over their lives are part of the recovery (Sandu, 2020, under review).

Previous research has shown that the formation of deep bonds with young people can cause workers to deviate markedly from traditional therapeutic roles. There is evidence, for instance, that workers prioritise personal over professional ethics as a guide to their practice (Sandu, 2019a).

Building on the literature, this paper seeks to identify the characteristics and actions of workers who have formed successful relationships with young people faced with major challenges. It reviews the relevant research literature, focusing on the attributes needed to build positive therapeutic relationships. An empirical study of worker-young person relationships is used to identify the qualities of workers needed to support young people facing significant challenges and to shed light on the way in which these qualities help to change the young people's outcomes. The paper ends with a discussion of implications for research and social policy.

Background Literature

Methodological advancements over the last two decades have allowed greater understanding of the contribution of therapists to clients' development. The evidence from controlled and naturalistic studies has indicated that *therapist effects* account for around 5-10 % of the variance in outcomes (Baldwin & Imel, 2013; Huppert et al., 2001; Lutz, Leon, Martinovich, Lyons, & Stiles, 2007; Wampold & Brown, 2005). Another eight percent is attributable to the quality of the relationship between therapists and clients, as measured by the therapeutic alliance (see Flückiger, Del Re, Wampold, & Horvath, 2018, for a recent meta-analysis).

What makes for effective therapists? Age, gender, training, skills, and experience or adherence to treatment integrity (i.e., following and delivering specified procedures) explain

⁴ The term 'worker' is used to describe people with variable professional training employed by an NGO to provide support to young people facing significant challenges.

only a small amount of the variance (Beutler et al., 2004; Huppert et al., 2001; Toffalo, 2000; Webb, DeRubeis, & Barber, 2010).

Proponents of common factors theory — the idea that progress is explained by a set of influences shared by most forms of therapy (Frank & Frank, 1993; Wampold, 2001) — have suggested that there is greater consistency in clinicians' technical abilities than their capabilities to form positive relationships with clients (Laska, Gurman, & Wampold, 2014).

The interest in the relational capabilities of therapists has led to research on the dynamics of therapist-client relationships. For example, it has been shown that clinicians have more influence on the creation of effective working alliances than clients do (see Baldwin, Wampold, & Imel, 2007).

The literature explains the strength of the relationship between workers and clients in two ways. First, the personal attributes of therapists — for example, the extent to which they are generally empathetic — plays a role. Second, therapists can learn specific relationship-building techniques associated with positive alliances.

Personal Attributes. Empathy, positive regard, and showing a genuine attitude have been studied extensively since Rogers' (1957) argued that these were the necessary and sufficient characteristics of any effective helpers, not just therapists. The APA Task Force on evidence-based therapy relationships found empathy to be the key ingredient with value also placed on positive regard and genuine attitude (Norcross, 2011). Ackerman and Hilsenroth (2003) highlighted other personal attributes including being flexible, experienced, honest, respectful, trustworthy, confident, interested, alert, friendly, warm, and open. The authors argued that these qualities were useful in creating intimate therapeutic environments that helped clients build trust and confidence in their therapists. The analysis did not extend to the paths linking personal qualities to outcomes. Ackerman and Hilsenroth (2001) also identified attributes that negatively influenced alliances, including being rigid, uncertain, exploitive, critical, distant, tense, aloof, or distracted.

Techniques. Techniques that can be learned by clinicians to forge positive bonds with their clients also play their part. Oddli and Rønnestad's (2011) in-depth study of nine experienced therapists identified four actions that enhance therapeutic alliances: exploring solutions proposed by clients, emphasising clients' authority, making joint decisions, and using tentative rather than directive language. Respecting the clients' agency appeared to benefit working alliances.

Ackerman and Hilsenroth's (2003) research highlighted techniques such as exploration, depth, reflection, being supportive, reflecting on past success in therapy, accurate

interpretation, facilitating expression of affect, active affirming, understanding, and attending to a patient's experience. In their analysis, the variables were markers that clients could read as empathy and/or as signs of connection to their therapists. Over-structuring or failing to structure therapy, inappropriate self-disclosure, managing, resisting transference interpretation, inappropriate use of silence, dismissing, and superficial interventions were found to hinder the development of positive alliances.

The available evidence on supporting individuals facing multiple and complex needs suggests that workers whose professional roles are less defined than those of therapists and typically do not operate within a treatment model need to build successful relationships with their clients by, for example, being available, providing practical help, persisting not enforcing support, and being a "friend" (de Leeuw, van Meijel, Grypdonck, & Kroon, 2012; Parr, 2016). Lynch, Newlands, and Forrester's (2019) mixed-method study showed that high levels of empathy were perceived when social workers asked open questions, showed curiosity, and expressed understanding and interest in the emotions of their clients. Additionally, Parr (2016) highlighted the fact that workers need to challenge clients in a supportive but assertive manner when the quality of the relationship is strong.

What clients seek from their therapists can differ from what therapists perceive to be beneficial for them. Heinonen et al. (2014) found that therapists viewed basic relational skills (e.g., empathy, genuineness) as fundamental to the alliance, but clients found these beneficial only in the short-term. In longer-term therapeutic relationships, clients valued therapists who adapted to their needs, including having the skills to deal with challenges during therapy. A meta-synthesis led by Noyce and Simpson (2018) showed that clients valued therapists who facilitated openness, did not judge them, and actively worked to reduce any power differential.

Summary. Broadly speaking, the literature stresses the importance of therapists' personal attributes, including empathy, holding the client in positive regard, honesty, and openness, alongside relationship-building skills, such as allowing clients to build, express, and act on their agency. In the context of severe and multiple disadvantage, the available literature stresses additional qualities such as workers' persistence, curiosity, and understanding. Existing research falls short of explaining how these factors exert their influence.

Question, Hypothesis, and Method

The present study sought to answer two questions. First, what are the qualities of people helping young people facing severe and multiple disadvantage (as assessed by the workers and by the young people they supported)? Informed by the research literature, I

expected that qualities such as empathy or being genuine would emerge as important. I also predicted, on the basis of my previous research (Sandu, 2020, under review), that additional qualities related to the specific needs of the young people and reflecting the need to disrupt the way they thought and promote their agency, would also be important.

Second, the study asked about the mechanisms by which the qualities of effective workers change the lives of young people. Building on my previous work (Sandu, 2020, under review), I predicted that worker qualities that were focused on eliciting change in the way young people feel, but not on how they think or take responsibility for their lives, would have no lasting impact.

Sample

The study focused on a sample of 30 young people supported by 11 U.K. organisations and five U.S. organisations. The young people's characteristics are described in Table 1. They were aged between 16 and 25; had experienced extended and substantial risks to their health and development, including abuse or neglect, poverty, and substance misuse; had significantly impaired health and development (for example, challenging behaviours, crime, or mental ill-health); had been supported by a voluntary or not-for-profit organisation for at least six months; had made a positive change relative to their situation prior to being involved with the organisation; and had formed a significant positive relationship with a worker in the organisation.

[Insert Table 1 about here]

In addition, 35 practitioners employed by the 16 participating agencies, and selected as being exemplary at relating to young people faced with extremely difficult circumstances, were interviewed. The characteristics of these workers are described in Table 2. Their jobs involved supporting young people (e.g., as therapists, counsellors, youth workers, or volunteers); were considered by leadership and peers to be exemplary in their role, particularly in the ability to relate to young people; and had been repeatedly identified by users as people with whom they had formed positive relationships.

[Insert Table 2 about here]

The 16 agencies were described as voluntary organisations in the United Kingdom and not-for-profit in the United States. The agencies specialised in dealing with young people whose needs crossed disciplinary divides and who had failed to make progress when supported by other organisations.

Procedure

The recruitment strategy was purposive reflecting difficulties in accessing high risk populations. The voluntary and not-for-profit organisations in the United Kingdom and the United States were identified through the author's professional networks. Leaders of each organisation were asked to nominate young people and workers according to the characteristics described above.

The interviewing protocols for youth and workers described in Tables 3 and 4 were built around themes identified in the review of the research literature summarised above. The final protocols were approved by an ethics committee in each country. The instruments were tested in pilot interviews in both countries, resulting in minor changes related to the order of questions, rather than content.

[Insert Tables 3 and 4 about here]

Analysis Strategy

The analysis was informed by a critical realist approach (Willig, 2013), meaning it was designed to capture the worker qualities that contributed to building successful relationships with young people exposed to significant disadvantage. The approach requires the analyst to break down the processes related to the study phenomenon, exploring the way they influenced the behaviour, thinking, and motives of the participants. This approach was complemented by phenomenological elements, for example the participants' subjective experience of their workers' attributes.

The data were analysed using Braun and Clarke's (2006) six stage thematic analysis approach. The data were coded paragraph-by-paragraph, starting with a list of pre-defined codes that were added to at each step in the analysis. Semantic as well as latent themes were coded. Each theme was selected based on its frequency and relevance to the research question. The analysis was conducted using the qualitative software NVivo11.

The trustworthiness of emerging findings (Lincoln & Guba, 1985) were scrutinised several times over. The initial finding and potential biases were explored with experts in each country. Triangulation was achieved both at the data source level, by collecting views from workers and young people, and at the analyst level, by checking for reliability of emerging codes (agreement computed using interviews with a third of the youth sample was Cohen's kappa = 0.76). The process can be illustrated with respect to the theme of "sharp empathy." Several conversations between raters' led to the definition (described below). These checks also generated changes to the coding framework, which was used in subsequent analysis to tighten the definition.

In addition, the author kept a reflexive journal of the coding process, recording summaries of case studies, changes made to the analysis strategy, and other aspects deemed noteworthy, such as connections between themes.

Analyses of variation in findings involved three steps. First, a deviant case analysis revealed differences that might be explained by sample selection, definition of severe and multiple disadvantage, or the young people's ability to reflect. Second, once the primary themes were established, the sample was divided into subgroups of those who had reasonable and low-quality relationships. The analysis strategy was then repeated on both subgroups. The themes emerging from the analysis were found to characterise the subgroup of young people who had poorer quality relationships. Third, an external auditor scrutinised the raw data, examining the way in which data were synthesised, how themes emerged and were linked. He also looked at the process notes and reflective journal to see how decisions or dispositions were captured. The auditing concluded that there was consistency between the emerging themes and the raw data. The feedback enriched the author's perspective on several themes.

Findings

[Insert figure 1 about here]

Three sets of qualities and actions displayed in Figure 1 characterised the workers' ways of relating to young people facing severe and multiple disadvantage: 1) their influence on the affective functioning of young people; 2) disruptions in the young people's cognition; and 3) the agency of the young people.

Three qualities did not fit the typology above: passion, humour, and "being comfortable in their own skin."

Workers' Qualities and Actions That Positively Affect the Affective Functioning of Young People

The analysis revealed eight worker qualities that facilitated change in the affective functioning of young people: not giving up, showing interest, and listening as well as being genuine, available, approachable, sensitive, and accepting of young people.

Workers not giving up on the young people they supported was reflected in intense efforts to reach young people who were unresponsive and/or fiercely testing workers' intentions. Consistency even in the face of chaotic and challenging behaviours plus patience when patterns of improvement were uneven also featured.

X114: You still have to contact them, and attempt to contact them twice a week. Sometimes all you get is an attempted, and that's okay. We just keep attempting. (Worker, United States)

A411: What I try to say, what is important is to keep the continuity with this population. As long as they are in the game, as long as you help them keep fighting, keep fighting, don't give up, you're fine. A lot of bad things will happen in that period and you will see a lot of disasters fall, as it happens for (young person), he nearly killed himself, and ended up in hospital several times, assaulted his mum. But if you stay long enough, good things will start to happen as well, and you just have to be long enough. (Worker, United Kingdom)

X002: I have my days where I won't respond to her because I don't know if I want to come back to the program. I will get phone calls every day. I will get text messages every day until I respond. She's persistent. (Young person, United States)

Workers looked beyond the issues that precipitated referrals and showed interest in the young people. To maintain this perspective, some workers delayed reading the information about young people's backgrounds, and instead they asked the young people about their interests, what they enjoyed doing, what excited them in life, or their favourite music.

K304: That, he'd just ask me about what I'm doing. Telling me if I've got a new girlfriend? All stuff like that, when I'm playing football, when I start school? If I've got a job yet? Just basically what I'm doing with myself. Yes. (Young person, United Kingdom)

Z111: And just again, leading off of that curiosity and seeing, what are the big things for you? What really gets you going? What makes you super excited to talk about and want to like do? (Worker, United States)

The ability to listen was found to be important to relationship-building. Its application meant spending a lot of time with the young people, appearing to do little, and nothing specifically to address challenges. Workers talked about the importance of listening from the "gut" and being prepared to be fundamentally challenged by what they heard. The

absence of guarantees of success or improvement and the sense of feeling listened to was compelling to the young people.

I411: I would listen a lot. And I wouldn't go in asking too many questions if I was new. No, you can't do that. Just being there witnessing stuff is quite important. Yes, I learnt very early on that you just being in a place and not necessarily saying anything or doing anything is enough for them, yes. (Worker, United Kingdom)

Workers described their interactions with the young people as "being themselves." They were prepared to reveal aspects of their lives beyond their professional roles, including trivial aspects of their personality or characteristics, such as their taste in food. Other times it involved sharing experiences of hardship, for instance their own health problems or family issues. Being able to admit to their vulnerabilities, including the limits of their ability to solve the young people's problems also illustrated being genuine.

F412: Warts and all, really, obviously I don't get into my own very personal stuff, but I am very happy for people to see who I am as a person. You know, I'm a little bit ditzy sometimes, you know, I eat crap, I drink too much coffee, you know, I don't drink much wine, and I don't mind, you know, I have life and interests and I've got lots of different things going on in my life, and I don't mind being me in that relationship; I'm a little bit, you can't see it on the thing, but I flap my arms about. I'm really expressive, and I'm kind of, can't always find the words that I want to use to say things. And that's fine because then... I'm just a person. I'm just (Worker), I'm a human being, and they feel that they feel that about me. (Worker, United Kingdom)

Workers were available when young people needed them. Young people valued easy and round-the-clock access to their workers, including connecting via their personal mobile telephones or social media.

Y112: Call me. Text me if you need anything. Let me know what you need. (Worker, United States)

K403: So if I needed someone to like turn to, I would go speak to (worker). (Young person, United Kingdom)

Young people found their workers approachable. As previously reported (Sandu, 2019b, under review), young people exposed to extremely challenging life circumstances become acute in their assessment of those who tried to get close to them. Young people described their first impressions of their workers as being friendly, smiling, and warm.

K303: I think he's a very cheerful person as well. I think that's extremely important, you know, he's not miserable. (Young person, United Kingdom)

W005: His aura was great. His aura, it was really positive. It was really strong, and he was just – he opened up with open arms. He was really warm. (Young person, United States)

Workers were sensitive to the underlying meaning of young people's requests and promptly responded when the need was practical. This ability was facilitated by length of time they had to get to know the young people. In addition, they were helped by a good general understanding of stages of youth development and of recurring issues in young people facing multiple disadvantages.

X113: Most of the time, it was just a lot of listening with him. Sometimes it was just being quiet because there was some empty conversations that we had where we just sit there, just being there. He saw that that was happening. (Worker, United States)

G301: I was still self-harming, but I was... I was punching walls when I did that, but then about a month into treatment, I started cutting again, which I hadn't done for a while. And I went and told her, and like I said, she didn't judge me. She didn't tell me off. You know, she just listened and held me while I cried. (Young person, United Kingdom)

Y112: I know she was saying she had a little pain on the left side of her face, and I asked if she needed any Tylenol, does she have any Tylenol. (Worker, United States)

Workers responded to the young people's characteristic feelings of unworthiness and lack of competence (Sandu, 2019b, under review) with understanding. They accepted young people when young people could not accept themselves. Workers withheld judgements about the young people's backgrounds, including decisions made by young people that risked

contributing to downward trajectories. They consistently treated the young people with respect and dignity.

X111: A lot of times, our guys know right and wrong. For the most part, I would like to hope that they know that selling drugs is wrong. Then the flipside of that is we don't know much about their history. Why are they selling drugs? Is that all they know? Are they providing for their family, or A, B, C, and D? Not judging is a big thing. For me, I'm never judgmental in what you do, what you decide to do because at the end of the day, it's still your life. (Worker, United States)

H302: The first thing I told her was about my kid, which was the whole point of being there, to learn more about my kid, than me and how I feel. But when I told her about that, she seemed to be, all right, you know, I'm not judgemental. So I got [inaudible] tell her more about myself, more about what I'm going through and that, and that's why I decided to tell her more about my mental health and where I'm living. (Young person, United Kingdom)

D411: I guess for me because I would never... I never view them any different from I'd view anybody else. I would hope that me just treating them as an equal, as I would everybody else does just slowly helps them, in building up more confidence. (Worker, United Kingdom)

The qualities described map onto the mechanism by which strong relationships promote change in the lives of young people facing severe and multiple disadvantage (Sandu, 2020, under review). Showing interest, listening, and being genuine in interaction helped the workers build common ground and personal connections with the young people. This, in turn, helped the young people to accept their atypical backgrounds. Being available, approachable, and responding with sensitivity and acceptance created a context conducive to young people expressing upsetting feelings, some of which had been “guarded” away for prolonged periods. Workers became their “emotional outlets.” The workers’ persistence and acceptance of young people made young people feel valued.

Workers’ Qualities and Actions That Disrupt Young People’s Maladaptive Thinking Patterns

Workers disrupted the young people’s maladaptive thinking patterns in two ways: by being unlike other workers and displaying sharp empathy.

The sum of the qualities discussed above led young people to describe their workers as different. When young people avoided and resisted the support, a previously common and successful technique, the workers in this study re-doubled their efforts to engage. Feeling listened to was new for these young people. Conversations that centred on the young people's interests and views on the world were also foreign. Not being asked about their problems was different.

Y114: Her previous worker – she said that she'd see the worker once a month. I made it my business to if I didn't see her, to call her because in the beginning, that's what I like to do with my new clients, especially my teenagers just to help establish our relationship. (Worker, United States)

H302: I've seen workers who criticise... I've seen... I've experienced it and I've seen the habits of people, workers who criticise people all day. They'll be nit picking and everything you've got to do it right. And if you don't do it right, then there's an issue, you know what I mean. It's not like that with (Worker). (Young person, United Kingdom)

Workers made agile assessments to find sensitive moments when young people's maladaptive behaviours could be addressed, a quality that I have labelled "sharp empathy." Its deployment, which entailed confronting the young people in a direct and uncomfortable way, was nonetheless considered by workers as part of their duty. Sharp empathy involved asking young people to engage with aspects of themselves which they disliked; other times it manifested in workers asserting firm boundaries, not accepting abuse, for instance. The purpose of the sharp empathy was to prompt the young people to reflect on behaviours such as personal boundaries or the quality of their interactions with others. Despite its sensitive nature, young people appreciated their workers' sharp assessments.

F412: Very, very reactive all the time. And then, slowly, because we kept coming back, and setting the boundary, you know, where, "This is voluntary, you came to us because you want to. We don't necessarily have to work with you if you continue to abuse us because that's not what we're here for." (Worker, United Kingdom)

Y112: "Hey, you're going to be an adult soon. You see your parents. They're not reliable. Your sisters are unwilling to accept you into their home. When you turn 18, if you don't follow the rules of the independent living program, you are maybe

homeless.” I think that was a reality check for her like, “Wow, you are right. I would have nowhere to go if I don’t get my act together.” (Worker, United States)

W005: He don’t sugarcoat anything. He’s really direct, and that’s what I respect more about him. He care about you, and he care about your feelings and stuff, but if it’s something that you really need to hear, he would tell you. (Young person, United States)

Young people’s astute assessment of others (Sandu, 2019b, under review), previously a major barrier to building relationships, strengthened the connection with the workers. The workers’ continuously supportive behaviours gradually disrupted the young people’s maladaptive templates built from past poor-quality relationships. Sharp empathy directly exposed young people to and helped them engage with aspects of their lives that got in the way of future progress, thus further dismantling the deep-seated negative views about themselves and about the world around them.

Workers’ Qualities and Actions Promoting the Agency of Young People

Workers facilitated young people’s sense of “I can do” through the following actions: pushing but not enforcing; tracking progress; solving; advocating; and linking.

Workers continuously pushed young people towards opportunities that matched their objectives. They started by asking young people about future aspirations. Some young people were clear about their goals, while others needed help. Workers then matched personal objectives (for instance, learning how to shave or cook) with opportunities to learn (e.g., exposure to quotidian activity with peers). The focus was more on everyday goals than statutory objectives like education or employment until the point young people’s goals resembled statutory objectives.

A302: Because I don’t go to school or do anything so I’ve got a lot of free time. And I always tell her, I don’t know, I want to do something, I want to have a job or do a course or something. She’s like, okay, well, we’ve got some job opportunities and there’s loads of courses and that. And she always gives me leaflets with different stuff to do. (Young person, United Kingdom)

Z001: Like, I learned how to shave here. Because I brought it up and then (Worker) brought it to another staff [...] who taught me how to shave in the staff bathroom

down there. He bought me a pack of Gillette razors and a bottle of shaving cream.
(Young person, United States)

Y001: Yeah, I would set my goals for what I wanted to do. At the time it was still hard to find a job. I'd run into jobs that would be a dead end. She would call me. "Mr. (Young person), there's a job right here. I want you to go there." She'd give me a bus pass or a bus card to get there to make sure I had the stuff I needed to get there to get to the job. (Young person, United States)

Workers tracked the young people's progress against shared goals, consistently monitoring whether and how young people honoured commitments. Workers reminded young people about pending tasks. They validated young people's efforts and, conversely, encouraged them not to give up when progress stalled.

K303: So throughout the beginning, I mean not so much now, before, he used to like keep tabs on us. He would like call us and see how we are, text us. And if there are job interviews, like, or screenings like we were pushed to go towards, he would like, you know, check up on us, that we're actually going to it and things like that. (Young person, United Kingdom)

X002: When she sees I'm doing better, she tells me all the time before I notice it. She'll come out of the blue and be like you just got this, you just got that. You're so close to getting this. Stay on it. I'll be like okay. I didn't even realize that. (Young person, United States)

Y003: I just started going back to school this year, and I didn't want to go back because I still got so much on my plate right now. (Person01) told me I better not do it. I better not drop out. I need to finish it if this is something I want to do. By her pushing me, it kind of gave me that boost. Now, as we speak, I'm still in school, so I haven't gave up yet. (Young person, United States)

Many of the problems faced by young people were posed by public systems (Sandu, 2019b, under review), for example, filling in paperwork to secure housing, letters about eligibility for public services, and negotiating access to children subject to child protection procedures. Workers' problem-solving skills helped young people deal with these challenges

and later in the process to re-integrate young people into society by, for example, helping them get passports, driving licenses, or secure a place in college or work.

G411: [...] she had social care involvement, but her home conditions were really, really bad. She hadn't had a bath for about a year since they moved into the flat, they haven't had hot water. And I think it was about getting services to recognise that she was saying this is really bad but other services that she wasn't meeting the threshold and things like that. So, I think it was about getting her voice heard and actually, you know, this is a young person who's really vulnerable, this is what she's saying.
(Worker, United Kingdom)

G302: I think it was when I was going through a dispute with another resident there actually, where I was living. And it got to the situation where I got scolded by a kettle and it was like the staff there were out to evict me even though I got scolded by the kettle. But (Worker) stood by me and like, did like supporting letters and helped me like appeal for certain things and she supported with that. (Young person, United Kingdom)

X003: For instance, my [driving] license is suspended. It was suspended for four years. Just hearing him talk to the judges about me and helping me get my license. Now I've got my license back. That was something that I really needed in my life. I can't take public transportation. I can't take the bus. I haven't taken the bus or the train in years. Him coming in to support me made me really appreciate his help.
(Young person, United States)

Workers advocated for the young people. In the absence of other positive relationships (Sandu, 2019b, under review), they were intermediaries between the young people and the outside world from which they were hiding.

X001: She's my ears. It helped me a lot. Not even my ears, she's my mouth. If I've got something going on about the program, she will really come in. I'll tell her this. She'll tell her boss. (Young person, United States)

A411: He never had a flat, he lost a flat when he was very young and all that, and he wanted a flat. He wanted his own flat. And we did have to fight with the housing officer and the CPN. Me or him, because or course... What kind of... He couldn't

access any supported accommodation because his drug use and mental health was too... Well, he can't sustain it. So we needed to fight, and I said, but if you are refusing this man to have a flat because his mental health, drug use, he hasn't got any incentive in life. This is his only worth, his only incentive. So you need to give them the chance to have a flat because, actually, you're not offering any other alternative accommodation, you are giving to a B&B where he doesn't feel safe. (Worker, United Kingdom)

H411: When you're with them you're the biggest champion for them. (Worker, United Kingdom)

Once the young people made progress, workers helped them establish good relationships with others in a position to help.

K303: That's one of the pinnacles of being with (Agency), and with (Worker), is that he set me off to do my Level 2's in English and Maths. Because although I wasn't thick, but I did really bad things at school, and you know, I left with appalling grades that I'm embarrassed of. So he helped me, he got me in touch with people called (AGENCY01), yes, it was (AGENCY01) I believe. And a Level 2, I gained I think 8 weeks in both English and Maths, and it's the equivalent to A-C GCSEs, so I was really proud about that at that time. (Young person, United Kingdom)

Workers talked of a three-step process — exposure to opportunities, trial, and experiencing the result — contributing to the young people's growing sense of "I can do" (Sandu, 2020, under review). The primary qualities displayed by workers were listening to young people's aspirations, persistence in the face of failure and using success as a motivation.

Passion, Humour, and Self-Awareness

The analysis also revealed three general qualities cutting across all aspects of the change mechanism: passion, humour, and self-awareness.

Workers viewed passion as fulfilling two functions in this work; one, it kept them committed when progress was uneven. Secondly, it served as their curriculum vitae for the young people, qualifying them as people who did this job for the right reasons, to help others and not "for the pay check."

F411: You've really got to want to do it because otherwise you just shouldn't be doing this kind of work. (Worker, United Kingdom)

Y113: I think any time I sit in front of a young person, it's not just, "Okay. I'm just here because I have to be." It's, "I'm here because I want to be." (Worker, United States)

W005: He loves what he do. He actually loves what he do. That's half the battle right there. When you actually love what you do, it's not a job to you anymore. He wakes up every day happy to come here. (Young person, United States)

Workers described humour as acting as an antidote for the challenges of the job and, occasionally, as a vehicle to connect with young people.

F412: We are a bit bonkers, to be fair. You have to have a sense of humour in this job, otherwise you'll just cry. (Worker, United Kingdom)

H411: I think for me humour is vital just to keep sane in this job and I think the women have used humour a lot as a survival skill. Some as a mask, some to disassociate, but humour I would say is what I use for the women. (Young person) responds really well to humour, even in the darkest times we'd probably end a visit with a smile. Not rolling around laughing, that would be completely inappropriate, but humour. (Worker, United Kingdom)

Workers monitored their feelings and actions. Despite the closeness of the worker-young person bonds, workers managed to be comfortable with and to detach themselves from hard feelings produced by the young people's challenging behaviours. The workers consistently checked with themselves about the motive of their relationships with young people, including their own agenda and agency targets they were charged to meet.

X111: In this work, at (Agency), the population that we work with, is an emotional roller coaster. You work with somebody for two years. They're doing well, and all of a sudden, they get killed on their way to work. You help a young person, and he's doing really well, or for example, you can't get to this person, and then you try, you try, but then they end up doing 10 years. You're like, "Did I do enough?" All those

things factor in. If you're not able to figure out how to work and how to manage all that, you won't last in this population because it's draining. It's very hard work to do. (Worker, United States)

D413: I think maybe try to be really, really aware of your own agenda, your own... anything that... I think there's a real subtle danger that can easily happen in any working environment where you leave the sight of compassion. Not compassion. You leave that human bit behind. And it's easy to miss, because it looks like you're pursuing the human bit because you want to help somebody with X, Y and Z, but you can really subtly stray away from that. And before you know it, you've done something that really isn't in that person's best interest at all. So I think being really aware of the subtle things that can draw you away from your instinctive focus on the need of that relationship. (Worker, United Kingdom)

Discussion

The qualities and actions of workers who forge positive relationships with young people facing severe and multiple disadvantage are summarised in Table 5.

[Insert Table 5 about here]

There is significant overlap between the perceptions of clients receiving support and the attributes of workers supporting those young people within a variety of therapy models (e.g., Norcross, 2011). These findings suggest that there may be a set of worker/therapist elements that are important regardless of the nature or depth of clients' challenges.

The study revealed additional qualities specific to the context studied here. For instance, only Parr (2016) had previously identified the value of workers challenging young people. Unlike Parr's work (2016), the workers in this study were also ready to confront young people in ways that made them feel uncomfortable, a characteristic related to the concept of "sharp empathy" defined above.

The agency of the young people was an important component of the worker-young person relationships, just as it is for therapist-client relationships (Oddli and Rønnestad, 2011). However, this study illustrated how the workers' efforts at promoting the young people's agency were aimed not only at building better relationships with them but at practically helping them exercise their sense of agency in order to positively change their trajectories.

In this study, the workers' qualities were consistent and abundant, not limited to once a week, one-hour consultations. The persistent listening, showing interest, being available, and sensitivity helped young people to feel positive and open up about things that upset them. The repeated experience of sharp empathy encouraged the young people to listen and reflect. The continuous pushing of opportunities towards the young people fostered agency. Therefore, the findings underscored the need for young people in very trying circumstances to high levels of effective support.

As in Lynch et al. (2019) work, this study highlighted the behavioral components of the qualities displayed by workers providing support in this context. Not giving up meant persistence, consistency, and patience. Being genuine involved workers sharing aspects of their personal lives and showing vulnerability. Tracking progress of young people involved checking-in, validation, and encouragement.

This study shed light on the way in which workers' attributes and actions affected young people's outcomes. Whereas previous research has loosely associated therapists' personal attributes to generic functions — for example, Ackerman and Hilsenroth's (2003) discussion of how being trustworthy, affirming, or warm helped create supportive environments for clients — in this study the qualities and worker actions have specific ties to the mechanism of change documented in previous research (Sandu, 2020, under review). One set of qualities were implicated in changing the way young people felt (e.g., listening, showing interest, accepting) and helped them open up their emotions (e.g., being available, approachable, sensitive). Another set prompted cognitive change in the young people (e.g., sharp empathy). A third set provoked recovery of the young people's sense of agency (e.g., pushing opportunities, linking with other support sources).

Just as Heinonen et al. (2014) found that basic interpersonal skills were helpful in short but not long-term therapy, this study showed how severe adversity demanded specific worker capabilities. Workers went beyond providing young people with safe havens and encouraged them to further develop by altering how they thought and acted, both sets of actions valued by young people. Attributes and actions that tap into the cognition and agency of young people facing severe and multiple disadvantage can complement those that tend to their emotional security to create the conditions sufficient for improvement.

There are several limitations to this study. It focused on a subgroup of young people and workers perceived by their organisations to have built successful relationships with each other. As such, it is difficult to generalise from these findings to, for example, populations with less complex needs. There was little information about how these qualities influenced

longer term outcomes or when their influence on outcomes was limited. Lastly, the study did not explore how contextual (e.g., organisational) factors hindered or enabled the deployment of the workers' qualities and actions.

Implications for Policy and Research

This study has implications for the selection, training, and support of workers who provide support to young people facing difficult challenges. The workers in this study displayed a range of personal qualities and acted in ways aimed at ensuring the best possible outcomes for the young people in their charge. Occasionally, these were at odds with the organisational and wider professional context. They were not just empathetic with young people; they were also sharp, when needed, much as parents are with their children. They regulated their impulses to intervene and to fix, and they listened to young people. They learnt how to deal with the demands of public systems so the young people could get suitable housing, education, and medical and psychological care. This study identified three sets of factors that have the potential to inform and shape the workforce needed for this population: the importance of personal qualities rather than methods of work, the ethics of care centred on virtues not necessarily professional codes of conduct, and the need for relational actions aimed at shifting young people's thinking and agency.

One overarching question stemming from this study is: How do the workers described here develop such relational capabilities? Their self-awareness or the ability to take risks, evident when they gave their personal mobile numbers to the young people or when they displayed sharp empathy, could be indicators of security within their attachment relationships. If so, this suggests that the quality of care that workers received in their close relationships may help explain their ability to engage with young people in difficult circumstances. Behaviour driven by personal rather than professional ethics could be a sign of their virtuous character. Understanding how workers develop relational capabilities is crucial for further informing the selection of people who are charged with supporting young people facing severe and multiple disadvantage.

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Table 1
Youth Sample Demographics and Characteristics (N=30)

Age range	16-25
Gender	
Male	18
Female	12
Reported housing difficulties	9
Reported mental health disorders	8
Reported emotional regulation difficulties	13
Reported self-harm (three attempts to commit suicide)	5
Reported substance misuse	5
Reported difficulties with education	11
Reported loss of family members (two murders)	5
Reported involvement with social care system	7
Reported involvement with criminal justice system	8
Social network	
<i>Social support</i>	
Perception of availability of someone to rely on	
Yes	5
No	20
<i>Composition</i>	
Positive ties	
Absence	7
Limited (one person)	9
Two or more people	9
Negative ties	14

Note. The characteristics above were mentioned freely, and were not elicited by the researcher, during the interviews. Given the young people's support from agencies that deal with populations with severe and multiple disadvantage, the actual number of risks they faced is likely to have been higher.

Table 2

Worker Sample Demographics and Characteristics (N = 35)

Gender	
Male	10
Female	25
Professional qualifications*	
In social sciences	20
Other fields	1
No higher education	4
Role in the agency**	
youth worker	7
outreach worker	4
program manager	4
mental health worker	3
development worker	2
case worker	2
key worker	2
practitioner	2
case manager	2
support worker	1
therapist	1
link worker	1
family support worker	1
teaching assistant	1
youth coach	1
project coordinator	1
Reported years of experience of supporting people with multiple and complex needs	
1-5	12
5-10	10
Over 10	8

* Not all workers spoke about their professional backgrounds in terms of their professional degrees.

**The diversity in worker labels reflects the fact that their support providing role is not clearly defined in this context.

Table 3

The Structure of the Interview Protocol for Young People

Sections interview	Topic
Part I: Introductory chat	Young people identify someone working at the support agency with whom they had a relationship that was important to them
Part II: Relationship with the worker	First impression Development of the relationship Turning points/ Positive and negative moments Worker qualities that contributed to/hindered the relationship Young people's qualities that contributed to/hindered the relationship 1 (never) to 10 (always) number exercise on key elements in relationships (e.g. trust; care) and follow-up with an example Short description of other meaningful relationships in the young people's lives
Part III: Life changes over the course of the support from the agency	Changes in the young people's life since they started coming to the support agency Follow-up questions about how young people explained such changes
Part IV: Self-perception	Self-description, current and past Sense of control and sense of pride, current and past
Part V: Conclusion	Advice for essential worker qualities in supporting young people in these situations

Table 4

The Structure of the Interview Protocol for Workers

Sections interview	Topic
Part I: Introductory chat	Workers identify a young person with whom they formed a positive relationship and helped to improve their situation.
Part II: Relationship with the young person	<ul style="list-style-type: none"> The beginning of the relationship Description of the young person and their situation Factors that contributed to/hindered the relationship Goals for change for the young person The middle of the relationship Progression of the relationship Positive changes in the young person and reasons for it Turning points in the relationship The end of the relationship Signs for when the worker was no longer needed Worker's role in the young person's progress Factors that hindered the young person's progress Changes in emotions and agency of the young person Description of the worker's current relationship with the young person
Part III: Workers' ability to support young people in difficult situations	<ul style="list-style-type: none"> What workers do when they relate to young people Personal and professional qualities involved in relating to young people and their development Ways in which relationships with young people benefit workers Emotions associated with supporting this population Reasons for when the relationship does not account for progress in the young person How the support agency supports/hinders the workers' ability to relate Ability to form and maintain several relationships The role of shame in this population

Table 5

Worker qualities and actions that promote change in young people facing severe and multiple disadvantages

Altering Emotions	Disrupting Thinking	Fostering Agency
Don't Give Up	Perceived as Different from Past Helpers	Push Opportunities
Show Interest	Sharp Empathy	Continually Track Progress
Listen		Solve Public System Challenges
Be Genuine		Advocate
Be Available		Link to Other Supports
Be Approachable		
Be Sensitive		
Accept Young People		

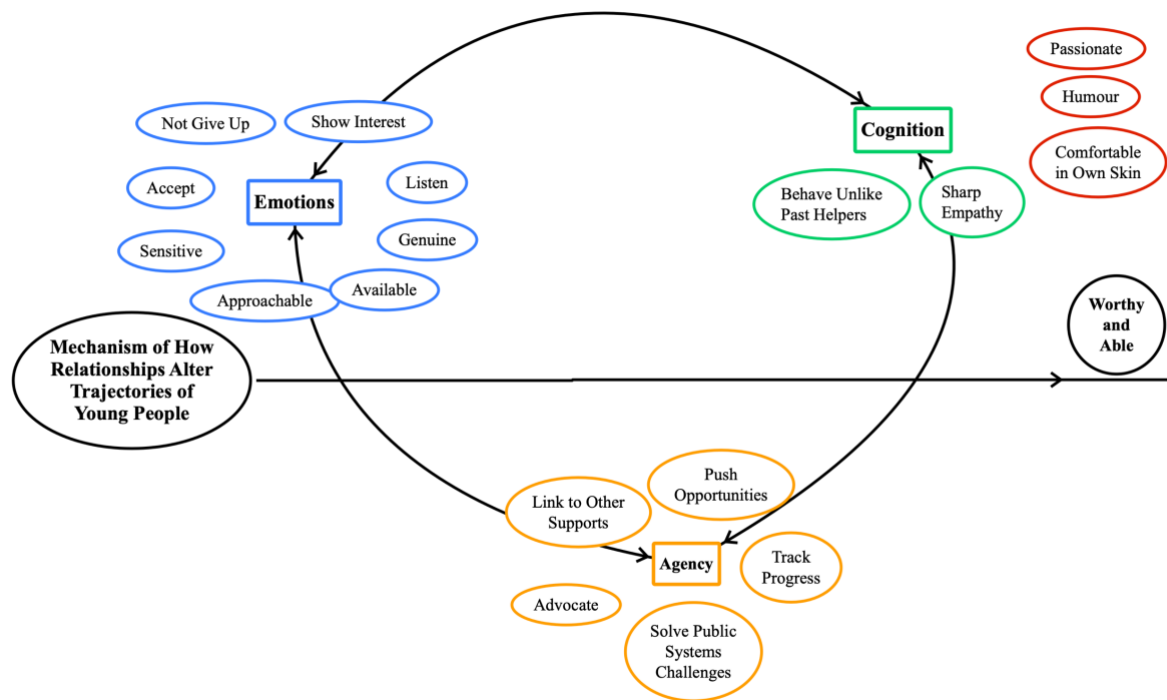


Figure 1. Qualities and actions of workers that map onto the path by which successful professional relationships alter trajectories of young people facing severe and multiple disadvantage.

Paper Five

Housing First, Connection Second: The Impact of Professional Helping Relationships on the Developmental Trajectories of Housing Stability for People Facing Severe and Multiple Disadvantage⁴

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⁴ Note that the referencing style follows Vancouver guidelines as requested by BMC Public Health

Abstract

This study sought to establish the impact of professional helping relationships on the developmental trajectories over 24 months of housing stability for 2,141 people facing severe and multiple disadvantage using data from the Housing First controlled trial in Canada. The study used a mixed method design. Latent growth curve and growth mixture models assessed the impact of working alliance across the sample as a whole and within subgroups with different patterns of housing stability. Thematic analysis explored the factors that may affect the quality of working alliances within different subgroups. Three distinct trajectories of housing stability emerged (i.e., Class 1: “sharp, sustained, gradual decline”; Class 2: “hardly any time housed”; Class 3: “high, sustained, and gradual decline”) with professional helping relationships having different effects in each. The analysis revealed structural and individual circumstances that may explain differences among the classes. The findings underscore the role of the relationships, as distinct from services, in major interventions for highly disadvantaged populations and draws new attention to the temporal patterns of responses to both the quality of relationship and targeted interventions.

Keywords: relationships, Housing First, sub-groups, housing stability, severe and multiple disadvantage

Housing First, Connection Second: The Impact of Professional Helping Relationships on the
Developmental Trajectories of Housing Stability for People Facing Severe and Multiple
Disadvantage Background

There is good evidence that the provision of housing can alter the trajectories of people facing severe and multiple disadvantage, particularly those experiencing homelessness. Interventions like Housing First have been shown repeatedly to reduce homelessness, increase housing stability, decrease hospitalisation, and improve quality of life (1-6). However, the effect sizes remain modest, and there is considerable variation in the reported impact on the different populations receiving such interventions (7).

One potential influence on that variation is the quality of the relationships between the workers who facilitate the transition into housing and the people facing multiple risks. This relationship is typically part of an integrated support approach or case management — providing basic functions such as outreach, assessment, planning, linkage, monitoring, and advocacy — developed in the last three decades (see 8 for a review). Morse's review (9) highlighted several service and client factors that are critical components to effective case management. These include frequency of worker contact, lower lengths of time homeless, fewer psychotic symptoms, gender, and fewer substance abuse problems. Morse recommended that effective staff members need to have skills and abilities that enable them to develop trusting relationships with the people they support.

Relationships vary across many domains including those that comprise Bordin's concept of working alliance (10): agreement about tasks and goals and the nature of the bond between client and worker. Despite the multiple needs clients face, research has shown that people facing the greatest challenges seek first and foremost a personal connection with their workers (11-12), facilitated by worker behaviours such as persistence, 'going the extra mile', being 'like a friend', and engaging in routine activities such as furnishing a home or going for a coffee (13-15). Practical help is also valued in these relationships as a way to further strengthen worker-client connections (12, 16).

There is other evidence that the worker-client relationship can influence outcomes. Goering, Wasylenki, Lindsay, Lemire, and Rhodes (17), for instance, found that a strong working alliance was a key element in achieving housing stability for 55 homeless and severely mentally ill clients connected to a hostel outreach program. Chinman, Rosenheck, and Lam (18) confirmed this in a sample of 2,798 homeless people with severe mental illness assigned to a program that offered outreach and intensive case management. Both research

groups found that having an alliance was more beneficial than having none and that the strength of the alliance was inversely related to days of homelessness. However, Tsai, Lapidos, Rosenheck, and Harpaz-Rotem (19) found the strength and quality of the therapeutic alliance developed within the first three months of treatment in a supported housing program was not associated with any major housing and employment outcomes, although it did influence subjective reports of the quality of life and social support as reported by others (20).

Client and system characteristics play a role in the development of working alliances. In a qualitative study, Padgett, Henwood, Abrams, and Davis (21) found that individual circumstances — severity of mental illness — and system factors — pleasant treatment surroundings, worker acts of kindness, and access to independent housing—facilitated engagement with and retention in mental and substance abuse treatment services by formerly homeless psychiatric individuals. Conversely, co-morbid substance abuse, rules and restrictions, and the absence of one-to-one therapeutic support hindered service use. Klinkenberg, Calsyn, and Morse (22) found that being African American and not hostile while having greater perceived needs and more program contacts predicted strong alliances at month two in a sample of 105 individuals participating in an assertive community treatment for those with severe mental illness and high risk of homelessness. Chinman, Rosenheck, and Lam (23) reported that having more social support, more subjective psychological problems, fewer overt psychotic symptoms, and more substance abuse problems were positively associated with building working alliances.

Several methodological limitations need to be noted, however (24). For instance, few of the studies described above included a control group. Follow-ups were typically short. Most researchers treated their samples as homogenous whereas practitioners reported heterogeneity (25). Recent evidence using new analytical approaches such as growth mixture modelling (GMM) underlines the high variability and the complex patterns of change within this population (26).

The present paper has three aims. First, it explores the different patterns of change in housing stability over a two-year period in a population of homeless people randomly assigned to the Housing First programme in Canada. Second, it examines the impact of client-worker relationship as assessed via working alliances across the sample as a whole and within subgroups with different patterns of housing stability. Third, it explores the factors that may affect the quality of working alliances within different subgroups.

Methods

A mixed method design was used. The study's first two aims were assessed via quantitative analyses whereas qualitative analysis was used to explore the third aim.

PART I: Quantitative

Three research questions were explored:

- What is the impact of the working alliance on trajectories of housing stability among homeless people, controlling for age, gender, intervention, and adverse childhood experiences? In line with other research (17-19), it was hypothesised that the quality of the working alliances would have a positive influence on housing outcomes.
- Are there multiple (unique subgroups of) developmental trajectories in housing stability among homeless people? As in previous studies (26-27), a variety of housing stability trajectories were anticipated.
- How does the working alliance affect existing unique subgroups of people experiencing homelessness? In light of research underscoring the role of client and systemic factors in the development of relationships, for example substance abuse or access to independent housing, it was hypothesised that the working alliance might affect different subgroups differently.

Program description. The At Home/ Chez Soi randomised controlled trial of the 'Housing First' programme took place across five Canadian cities (identifier ISRCTN42520374). The study was approved by 11 research ethics boards. Participants, recruited between October 2009 and June 2011, were stratified by the degree of mental health service support required. Those with high needs were assigned to receive either assertive community treatment (ACT) or treatment as usual (TAU); those with moderate-needs to receive intensive case management (ICM) or TAU. Goering et al. (28) have described the study protocol in detail.

Participants. Participants were legal adults, absolutely or precariously housed, and had a mental disorder (with or without a concurrent substance use disorder). More than a third (34%) met the criteria for a psychotic disorder and two thirds (67%) for substance abuse or dependence. On a scale of 0-10, the average number of adverse childhood experiences was 4.6. Two thirds of the sample were male (67%), over half (57%) were aged between 35 and 54 years. Four-fifths were born in Canada and one fifth (22%) were aboriginal. Nearly all (93%) did not work at baseline and fewer than half (45%) had completed high school.

Study procedure. ACT and ICM participants received housing of their choice as well as mental health services. TAU participants had access to local services. All intervention participants were supported by a worker through an ACT or ICM team; TAU participants were directed to other local resources, but availability was subject to local resources constraints. Comprehensive in-person interviews were conducted at baseline and every 6 months, and housing was assessed every 3 months. Qualitative interviews at baseline and 18 months were conducted with a tenth of the sample. Participants were compensated for their time with C\$30 to C\$50.

Measures. The Residential Time-Line Follow-Back Inventory (RTLFB) (see 29 for reliability and validity information) was used to measure the housing stability over time by the proportion of the number of days for which any type of residence (as living in one's own room, apartment, or house or with family) was available over the preceding 6 months. Relationships between participants and workers were assessed with the Working Alliance Inventory Short Form, adapted (30) from the original 36-item version (31) which captured the degree to which clients and workers agreed on therapy goals and tasks and the quality of the bond between them. Each of the three sub-scales has 4 items rated on a 7-point scale (1=never, 7=always). Because the participants' accounts of their working alliances were assessed at multiple time points whereas the workers' perceptions were assessed once, only the client assessments were included in the analysis. Childhood trauma was assessed using the Adverse Childhood Experiences (ACE) Scale (32) which asks 10 questions related to childhood abuse and household dysfunction before age 18 years.

Quantitative analysis strategy. Data analyses were conducted using Mplus Version 7.4 (33) and missing data were handled using full information maximum likelihood (FIML) estimation. Prior to fitting growth models, preliminary analyses including individual trajectory plots, descriptive statistics and correlations were conducted using SPSS.

Latent growth curve model. A well-fitting latent growth curve model (LGCM) was used to determine the overall sample trajectory. LGCM assumes a single homogenous population in which individual variations around the overall mean growth trajectory are captured by the random intercept and slope coefficients (34-35). Linear and quadratic growth models were used to find the best-fitting representation of change for the sample. Baseline time-invariant covariates (age, gender, intervention, adverse childhood experiences) and the time varying covariate of the working alliance measured at six months after baseline to the end of observation in the best-fitting unconditional LGCM were used to determine predictors

of growth factors and variation in housing stability, respectively. The following fit indices determined adequate fit: Standardized Root Mean Square Residual ($SRMSR < .08$), Root Mean Square Error of Approximation ($RMSEA \leq .06$), Comparative Fit Index ($CFI \geq .90$) and a non-Normed Fit index (NNFI; aka TLI $\geq .90$) (36-37). The LGCM was used to select a baseline model for the growth mixture model (GMM).

Growth mixture model. The Latent growth mixture model (LGMM) (38) framework was used for data analyses to assess heterogeneity in patterns of change. The GMM approach adopted allows for differences in growth parameters across unobserved subgroups or classes (35) whereas LGCM assumes all individuals belong to a single population. Additionally, LGCM assumes that covariates affecting class membership influence everyone in the same way. We hypothesised that qualitatively different subgroup trajectories may exist in the sample of homeless people reflecting variations in their health, impairment, and resilience. Progressively larger numbers of latent class (1- class to 4-class) solutions were run to determine the optimal number of classes (38-40). To determine the optimal class solution, a variety of fit statistics with classification accuracy were examined, so that average probability of belonging to the most likely class should be high, and the average probability of belonging to the other class should be low (41). In particular, the Bayesian Information Criterion (BIC), sample-size adjusted BIC (ABIC), Lo-Mendell-Rubin Likelihood Ratio test (LMR-LRT), Bootstrapped Likelihood Ratio test (BLRT), Akaike information criterion (AIC) indices and the Entropy values were examined. The fit indices in combination with theoretical interpretability and class profile plots guided the final model selection. Once the optimal class solution was selected, the R3STEP (42) command was used to including covariates (age, gender, intervention, adverse childhood experiences) in the model to predict class membership. R3STEP results in less biased parameter estimates while maintaining a stable class solution and interpretable coefficients for the covariates (42). Working alliance was included in the model as a time varying covariate to explain variation in housing stability.

PART II: Qualitative

Qualitative Analysis Strategy. The quantitative analysis identified three patterns of associations between working alliance and housing stability. In groups one and three there was a strong relationship between working alliance and housing stability, and in group two only a weak relationship. The qualitative analysis focused on 10 participants from group one and 10 from group two.

Three sub-questions were examined:

- Do participants differ in their perceptions of relationship quality? Given the quantitative results, it was hypothesised that there would be group differences in definitions of good relationships.
- Do structural problems in programme implementation explain variation in the results? It was hypothesised that structural factors might undermine the quality of relationships between workers and participants.
- Do participant circumstances explain group differences in the results? It was hypothesised that the type and volume of adverse life circumstances and risks in group two, as compared to one, would limit the impact of worker-participant relationships on participant outcomes.

Participants from both groups were randomly selected from the available qualitative data pool. They varied with respect to age, intervention mode, gender, and number of adverse childhood experiences.

The analysis was informed by a critical realist approach (43) and employed Braun and Clark's (44) six-stage thematic analysis approach. The analysis focused on the sentences in which the relationships with workers were mentioned. Codes were generated at each step. The analysis was conducted using the qualitative software NVivo 12. The trustworthiness of the emerging findings was tested twice. First, the author kept a reflexive journal in which noteworthy aspects of the analysis were recorded. Second, an external auditor (MSc student) scrutinised a third of the data and the emerging findings, generating further insights. For example, additional dimensions (e.g., care, honesty) valued by participants in good relationships were revealed by the audit.

Results

1. Quantitative Analyses

Latent growth modelling (Unconditional model). A linear growth trajectory of housing stability showed poor fit ($\chi^2 = 1044.753$, $df = 9$, $p < .001$; SRMR = .269; RMSEA = .232, [90% CI = 0.220, 0.244]; CFI = .629; TLI = .588). A quadratic growth trajectory was better, reaching acceptable fit ($\chi^2 = 240.709$, $df = 5$, $p < .001$; SRMR = .064; RMSEA = .148, [90% CI = 0.133, 0.165]; CFI = .916; TLI = .831). The RMSEA tends not to perform well with growth curve models because of the few degrees of freedom (45). The unconditional quadratic growth model was found to be the best-fitting representation for the overall sample. The average intercept or initial status was significant ($I = 8.404$, $p < .001$), and the linear

trajectory, which showed a positive rate of change, was also significant ($S = 36.340, p < .001$). The quadratic growth factor declined significantly over time, showing a decelerating change in growth after controlling for the linear trajectory ($Q = -6.899, p < .001$). The variance of the intercept was not significant ($67.979, p = .085$), which indicated that there were no inter-individual differences in the initial status of housing stability. The variance in the linear ($823.691, p < .001$) and quadratic ($40.476, p < .001$) growth factors were highly significant, indicating significant inter-individual differences in the rate of change in growth.

Latent growth modelling with time-invariant and time varying covariates.

Including the time-invariant covariates (LGCM – TIC) did not improve model fit ($\chi^2 = 312.424, df = 12, p < .001$; SRMR = .042; RMSEA = .128 [90% CI = 0.116, 0.140]; CFI = .890; TLI = .725). Another conditional model with the time-invariant covariates and working alliance as a time varying covariate (LGCM –TIC and TVC) ($\chi^2 = 67.419, df = 31, p < .001$; SRMR = .032; RMSEA = .046 [90% CI = 0.031, 0.060]; CFI = .942; TIL = .906) showed adequate fit. Parameter estimates for both LGCM – TIC and LGCM – TIC and TVC models are shown in Table 1.

[Insert about here Table 1]

Figure 1 shows the LGCM – TIC and TVC. The variance in the linear ($401.945, p < .001$) and quadratic ($25.393, p < .001$) growth factors, and their covariance ($-96.970, p < .001$), were highly significant, indicating significant inter-individual differences in the rate of change in growth as a function of the covariates. The R^2 values (i.e., explained variance) in housing stability (baseline = 7.5%; six months = 35.2%; twelve months = 66.4%; eighteen months = 50.1%; twenty-four months = 34.2%) indicate that variation in housing stability is well explained by the growth factors and working alliance. The explained variance at baseline accounted for by only the intercept growth factor without the working alliance was small. Controlling for the effect of working alliance, the time-invariant covariates explained ($R^2 = 14.2\%, p = .660$) in the intercept, ($R^2 = 24.7\%, p < .001$) in the linear and ($R^2 = 22.8\%, p < .001$) in the quadratic growth factors. Participants who received the intervention experienced a rise but also a decelerating growth in housing stability. The working alliance had a significant positive effect on housing stability at six months but the impact gradually declined from the twelfth month, although the declines were not significant.

[Insert about here Figure 1]

Growth mixture model of housing stability. Because the unconditional quadratic growth trajectory demonstrated acceptable fit to the data, it was decided to estimate the growth mixture modelling (GMM) to determine whether subgroups of individuals could be identified within the data. The latent class growth analysis (LCGA) used freely estimated class means but fixed within-class variances to zero, assuming within-class homogeneity. Because estimating the GMM produced negative variances, growth factors variances were constrained to zero (46). Further, because intercept variance in the unconditional quadratic growth model was not significant and invariance of intercept means did not vary significantly across classes ($\chi^2 = 2.487$, $df = 2$, $p = .288$), the intercept was constrained to be equal for all classes. Non-invariance in linear ($\chi^2 = 4738.001$, $df = 2$, $p < .001$) and quadratic ($\chi^2 = 2249.947$, $df = 2$, $p < .001$) growth factors showed that initial housing stability did not significantly differ between classes but that the rate of change and the decelerating change in growth trajectory were significantly different between classes.

Table 2 shows model fit indices for all unconditional mixture models under comparison. The model with the 1-class solution showed the largest AIC, BIC and ABIC values, indicating its fit was worst. In addition, the LMR LR test, ALMR LR test and BRLRT in the 2-class solution all had p -values $< .05$, suggesting that it was appropriate to reject a single-class solution in favour of at least two classes. The results suggested that the rate of change in housing stability among the participants was heterogenous, not homogenous, even though participants had similar initial status. To determine the optimal number of classes, we examined the Bayesian Information Criterion (BIC) and the Lo-Mendell-Rubin Likelihood Ratio test (LMR-LRT), the Bootstrapped Likelihood Ratio test (BLRT) and guidance by theoretical interpretability of the class solution. Statistically significant p -values for the LMR-LRT and BLRT indicated that the current (k -class) model fit better than the model with one less class ($k-1$ class). The LMR-LRT of the 4-class solution indicated that it did not fit better than the 3-class solution, and the 3-class solution's BIC was smaller than that for the 2-class solution. Alternatively, comparing GMM's with 2, 3 and 4 classes, there was clear improvement in model fit when moving from a 1-class to a 2-class solution, and the LMR-LRT suggested improved model fit when moving from a 2-class to 3-class solution, but reduced model fit when moving from a 3-class to 4-class solution. Thus, the 3-class solution that showed a reasonable representation of the data and a more parsimonious model was selected.

[Insert about here Table 2]

Figure 2 displays the class profile plot and Table 3 displays the growth parameters. Class 1 showed “sharp, sustained increase, gradual decline,” with sharp initial increases and decelerating rates of change. Class 2 showed “hardly any time housed” and Class 3 “high, sustained, and gradual decline” in housing stability.

[Insert about here Figure 2] [Insert about here Table 3]

Predictors of class membership and within-class housing stability. Once the growth mixture model was established, the R3STEP approach in Mplus was used to examine predictors of class membership. To include working alliance as a time varying covariate, housing stability was regressed on working alliance from T1 to T4 in each class. The reference category was switched across regressions so that all pairwise comparisons were made. Age and intervention at baseline were significantly related to class membership with respect to the high, sustained, gradual decline and sharp, sustained, gradual decline classes (see Table 4).

[Insert about here Table 4]

In order to compare the means for age and intervention status across the classes, the DU3STEP approach, which assumes unequal means and variances, was used in a separate analysis. The results showed that older participants and those receiving the intervention were more likely to be in sharp, sustained, gradual decline, than younger persons or those not receiving intervention would be. All other pairwise comparisons were nonsignificant. The working alliance differentially predicted housing stability across the three classes. In the *high, sustained, gradual decline* class, the working alliance predicted housing stability at six ($b = 0.304, p < .05$), twelve ($b = 0.278, p < .05$), and twenty-four ($b = 1.007, p < .001$), but not eighteen ($b = -0.011, p = .734$) months. In the *hardly anytime housed* class, the working alliance did not predict housing stability over time, indicating that working alliance did not have an effect on housing stability for participants in this class. In the *sharp, sustained, gradual decline* class, the working alliance significantly predicted housing stability at six ($b = 0.228, p < .001$) and twelve ($b = -0.081, p < .05$) months but not at eighteen ($b = 0.001, p = .925$) and twenty-four ($b = -0.031, p = .674$) months. The class varying results imply that class membership moderated the causal relationship between working alliance and housing stability when controlling for other covariates.

2. Qualitative Analyses

The qualitative analysis closely examined 10 participant narratives from the *sharp, sustained, gradual decline class* (i.e., working alliance predicted housing stability) and 10 from the *hardly anytime housed class* (i.e., working alliance did not predict housing stability).

As previously described, three hypotheses were advanced to explain the differences in housing stability. The first was disproven by the qualitative analysis. Participants in both classes held similar perceptions of what counted as a good relationship with their worker. They wanted those assigned to help them to be available when needed, able to listen, authentic, and caring as well as to provide practical help. They sought personal connections that went beyond professional transactions.

If I really need her yeah, she's there [Yeah] you know, I can call her and there's times where I have really needed her and she like drove to my place and [Awesome] or gave me rides to appointments, she's an amazing worker. (Female, 19, Intervention, 9 ACEs, from *sharp, sustained, gradual decline class*).

Very much so, it's probably one of the, one of the most, most reasons why I am still where I am at because of them and the support [Um hmm] you know what I mean, [Yeah] if that makes any sense. [...] Um hmm, and real support, not just phony going through the motions shit. (Male, 45, male, Intervention, 5 ACEs, from *hardly anytime housed class*)

Workers considered by participants to be unhelpful were described as infrequently available, not trustworthy, impersonal, judgmental, and avoidant of the personal choices made by those they helped.

She [worker] was in my space, she just kept coming to my door and I'm sick of them you know, they pay attention to ya if you flood or burn the house down. But not otherwise, not. (Female, 20, Intervention, from *sharp, sustained, gradual decline class*)

My old [worker] um closed my file while I, while I was still on uh probation, and told me that I didn't have enough goals to work on yet. (Female, 24, Intervention, 0 ACEs, from *hardly anytime housed class*)

The second hypothesis was supported by the qualitative evidence. Four structural factors appeared to explain the variation in relationship quality across the two groups: staff turnover, timing of worker assignment to participant, relational capability of the workers, and

the uncertainty associated with the end of the programme (which may also explain variations in the growth curve analysis).

Frequent staff changes meant that some participants had to continually re-tell their personal stories. In some cases, this led to disengagement.

I just need somebody and she tells me she's not qualified and that's it. I usually just don't answer the door, I peek out and see who it is and I don't answer the door.

Because why would I want to repeat the same story to a different person. (Female, 30, Intervention, 1 ACE, from *sharp, sustained, gradual decline class*)

Comparing the quantitative records of worker assignments to participants with the latter's accounts of their relationships with those workers suggests that delay made it harder to form positive relationships.

Participants indicated that workers varied across sub-groups in their relational capability, including their ability to listen, provide practical help, and invest the time needed to form a connection that went beyond the minimum required by the service.

The end of programme was a continual threat to intervention participants in particular. It was a reminder that the relationship with the worker was to some extent a function of the intervention and could not endure, evoking feelings of sadness. This was compounded by uncertainty about their housing situation and support services.

My new family now. I'm gonna miss it once it's finished you know. (Male, 41, Intervention, 6 ACEs, from *sharp, sustained, gradual decline class*)

I have accumulated a lot of stuff from my apartment, a lot of nice stuff and I love my apartment and it's going to be {Long pause} hard leaving it if they don't get more funding after the 3 years. (Male, 44, Intervention, 5 ACEs, from *sharp, sustained, gradual decline class*)

The above themes applied across classes. A second phase of the qualitative analysis focused on differences between the groups, and in particular, on why the working alliance had little effect on participants' housing stability in the *hardly anytime housed* class. In this class, a higher proportion of participants received TAU (66%) compared to the *sharp, sustained, gradual decline class* (41%), decreasing the chances of them being routinely connected to a worker.

Like, I'd feel like I was getting support in one area and [I would wonder] God, how long is it going to last? You know, I had different people that I'd see on a regular

basis, but people were always passing the buck. And it got to the point for me where it didn't matter who I was talking to – I didn't feel that I was getting the right answers. I would feel like I was spinning my wheels. (Female, 49, TAU, 7 ACEs, from *hardly anytime housed* class)

In addition, the qualitative analyses showed that participants from the *hardly anytime housed* class actively avoided social relationships. Contact with family and friends was also less. In the *sharp, sustained, gradual decline* class, by contrast, relationships with family and friends were often cited as sources of support.

No contact with family? They're all dead. My sister I haven't seen in 25 years and that's about it. (Male, 53, TAU, 4 ACEs, from *hardly anytime housed* class)

A lot of my friends are disabled and just can't hold the alcohol and my family members we're distant. I talk to them once a year...(Male, 31, TAU, 5 ACEs, from *hardly anytime housed* class)

Other participants in the *hardly anytime housed* class reported past high consumption of drugs and involvement with the criminal justice system and these risks endured throughout the study period.

When I left (Place08), I had to go before I lost it and put myself into jail for a longer period of time, so I had to leave the building. I was only in there from February to June. That's as much as I could take of it. (Male, 25, TAU, 7 ACEs, from *hardly anytime housed* class)

Well when I went into the (Place03) I had six months clean. I managed to stay two months clean doing the laundry there... And then the building started filling up, and it was filling up with all the worst druggies – the people that really were un-housable anywhere else. And they started knocking on my door asking for lighters at three o'clock in the morning, offering me tokes... I mean, it was just beyond... It's like, they could see I was straight and they liked that, but they wanted to bring me down. So I had a lot of people offering me drugs and da-da-da-da-da. And I finally fell. (Female, 52, Intervention, 2 ACEs, from *hardly anytime housed* class)

In addition to the risks to housing stability, interviews with the *hardly anytime housed* class participants made more references to guilt resulting from their perceptions of the way in which their behaviours negatively affected others, their families included. As one participant

put it, a calm space afforded by a house, provided with the intention of creating stability, allowed feelings of guilt to surface, so undermining housing stability. As Sandu (2019, unpublished data) found, guilt and shame can play an important role in distancing people from social support and relationships.

I don't know if it's all (I/A), all the shits that's been coming down the last 3 months or if it's my past catching up with me. {Long pause} But I lived a really, really fucked up life eh [Um hmm], I did (I/A) like I was a mess worse than so now, worse than now [Um hmm] pardon me [Um hmm], more so than now. {Long pause} For 7 years in (I/A) penitentiary watching people dying by the knife blade and [Yeah] hockey sticks and having nightmares and shit at night eh? {Long pause} I don't need this in my life right now when this is (I/A), things are starting to get back on track, it starts happening to me. (Male, 45, Intervention, 5ACEs, from *hardly anytime housed* class)

Discussion

This study investigated the impact of professional helping relationships on the developmental trajectories over 24 months of housing stability for people facing severe and multiple disadvantage using a mixed-method design. Overall, the quality of the client-worker relationship made a significant contribution to the participants' housing stability. The population was not homogenous. Three distinct trajectories of housing stability emerged (i.e., Class 1: "sharp, sustained, gradual decline"; Class 2: "hardly any time housed"; Class 3: "high, sustained, and gradual decline") with professional helping relationships having different effects in each. The analysis revealed structural and individual circumstances that may explain differences among the classes.

Not everyone had an equal chance of remaining stably housed: specific subgroups of people facing severe and multiple disadvantage face unique and different adversities so that interventions are not equally effective for different subgroups of homeless people. At the start, being male, the number of adverse childhood experiences, and being in the treatment-as-usual group reduced tenancy security. Older participants who received the intervention were more likely to remain in their homes over the study period. However, when the strength of the working alliance between the worker and participant was also considered, the above variables no longer predicted housing stability, demonstrating the importance of relationship quality.

There is overlooked heterogeneity in the recovery profiles of highly disadvantaged individuals (see 26 for exceptions). The first of three classes identified in this study had 1240 members (57.5% of the sample, with 73.6% of them receiving the intervention) (See Table 5). Participants in this group (who were older, disproportionately female, and with adolescent-onset homelessness) started with an initial spike in housing stability that was maintained until the last six months of the study when it diminished. The second group, representing over a third of the sample (37.1%, with 33.4% of them receiving the intervention), were the least successful in achieving housing stability and spent almost all the time unhoused. Participants in this group were predominantly male (73%), had longer histories of being homeless, could count on fewer people for social support, and spent a higher proportion of the study period imprisoned than did participants in the other groups. The third group and smallest group (5.5%, with 53.3% of them receiving the intervention) followed a similar pattern of housing stability that was similar, but significantly different from, that of the first group. Participants were older when they first became homeless and spent fewer years being homeless, relied on larger social networks, and had higher rates of substance use than participants in the first group (comparable to that of participants in second group).

[Insert about here Table 5]

The non-linear patterns of housing stability may be important, as suggested by Adair et al. (26) too. Policy makers and intervention scientists think programmatically in one- or two-year blocks, but the disadvantage that qualifies participants for intervention is accumulated over a lifetime. More attention to programme endings may be called for since it was a great source of anxiety for programme participants and contributed to housing instability for the most successful individuals in this study.

There was significant variation both in the impact of the intervention and in the contribution of the working alliance between support workers and participants. Relationships in the first year predicted housing stability over time for one group (Class 3), in the first year for another group (Class 1), and not at all for a third group (Class 2). The qualitative analyses revealed a number of possible reasons for this variation. In line with previous work (21, 23), individual circumstances played a role in relationship development and housing instability. Participants' lifestyles (drug use) and systemic responses to that lifestyle (imprisonment) may make it harder for them to form relationships and easier for those relationships to be disrupted. For example, participants in Class 2 spent more time in prison

than those in Class 1; this might have affected relationships by reducing the amount of time available for workers and participants to meet while also adding to housing instability.

Counter-intuitive impacts were found. A stable home can produce time for reflection, guilty feelings about the impact of past behaviours on family and friends, and a consequent backing away from these relationships and supports. Depletion and active avoidance of social connection can make it harder to form and sustain the effects of positive professional relationships. Padgett, Henwood, Abrams, and Drake (47) also found that people who experienced serious mental illness, substance abuse, and homelessness used a “loner talk” when talking about themselves in relation to others. However, Padgett et al. (47) also revealed that the participants had a desire to connect with others but were impeded by other factors, such as ambivalent nature of family ties, the focus on achieving housing stability rather than relationships, negative social networks, and substance abuse. These findings underscored the role of the relationships, as distinct from services, in major interventions for highly disadvantaged populations, and draws new attention to the temporal patterns of responses to both the quality of relationship and targeted interventions.

This study also explained significant variations among sub-groups of participants and elucidated the characteristics of high-quality relationships between workers and participants, underlining the importance of a sense of personal connection (11-12, 14-15). Study participants understood what counted as a quality relationship, but there was considerable variation in their (and their workers’) ability to secure such relationships. Temporal aspects of these relationships were also highlighted. The intervention — the provision of housing — endured but the change of workers was sometimes experienced by people as a sense of personal loss (47), and which contributed to housing instability.

There are several limitations to the study. The concept of the working alliance, although widely used, fails to fully capture the essence of worker-client relationships. Sub-components of the working alliance were not identified, although this could have resulted in further understanding of how working alliances function in this population. Inclusion of different outcomes, in addition to housing stability, could have yielded a fuller picture of how relationships affect outcomes. Estimation of the mixture model did not use predefined group membership that could identify different trajectories for intervention and treatment-as-usual groups, although in the only study that has done this (26), the best performing class was similar to the one found in this study. The R3STEP analyses avoided biased class formation when including of covariates by retaining original class membership but the predictors’

coefficients may have been biased the R3STEP procedure does not allow missing cases on exogenous predictors. Causal relationships between covariates and class formations should thus be inferred with caution. The themes provided by the qualitative analysis could have been further explored by increasing the number of transcripts analysed.

The study also had several strengths. It added to a body of evidence showing that professional helping relationships can have positive effects in severely disadvantaged groups (17-18). The analysis overcame the methodological limitations associated with previous studies (e.g., 19) including the absence of control groups, brief follow ups, and assumptions of sample homogeneity. Sample selection for the qualitative analysis was driven by the quantitative analysis. Further, this was one of the first studies to firmly establish the impact of the working alliance on the trajectories of people facing severe and multiple disadvantage in the context of a multisite randomised controlled trial of a major housing intervention. The effect of the working alliance on housing stability across the population and on its subgroups and the factors that may explain these differences have important implications for future responses to people facing life's greatest challenges.

Conclusions

The quality of professional helping relationships made a significant contribution to the housing stability of people experiencing homelessness and mental illness, with different effects detected on unique subgroups within the homeless population. Attention to structural and individual factors may ensure that more people benefit from the relationships developed with the workers charged with their support.

Abbreviations

ABIC: Sample-size adjusted BIC
ACE: Adverse Childhood Experiences
ACT: Assertive community treatment
AIC: Aikake information criterion
BIC: Bayesian Information Criterion
BLRT: Bootstrapped Likelihood Ratio test
CFI: Comparative Fit Index
CSI: Colorado Symptom Index
DF: Degrees of freedom
GMM: Growth mixture modelling
HS: Housing stability
Gain-SPS: Global Assessment of Individual Need Substance Problem Scale
ICM: Intensive case management
INT: Intercept
INTER: Intervention
LGCM: Latent growth curve model
LGMM: Latent growth mixture model
LCGA: Latent class growth analysis
LMR-LRT: Lo-Mendell-Rubin Likelihood Ratio test
MCAS: Multnomah Community Ability Scale
MINI: Mini-International Neuropsychiatric Interview
NNFI: Non-Normed Fit index
RTLFB: The Residential Time-Line Follow-Back Inventory
SRMSR: Standardized Root Mean Square Residual
RMSEA: Root Mean Square Error of Approximation
TAU: Treatment as usual
TAV: Time-varying covariate
TLI: Tucker-Lewis index
TIC: Time-invariant covariate
QUAD: Quadratic growth factor
WA: Working alliance

Declarations

Ethics Approval and Consent to Participate

The current study was approved in the United Kingdom (by The Ethics Committee of the Centre for Social Policy, an activity within the charity the Warren House Group at Dartington) and in Canada by the Research Ethics Board of St. Michael's Hospital (REB #:15-009). Consent to participate for this study was not applicable as this is a secondary data analysis of an anonymised data set from the Housing First trial in Canada known as At Home/Chez Soi.

The At Home/Chez Soi trial was conducted in Vancouver, Winnipeg, Toronto, Montreal, and Moncton, with data collection from October 2009 to June 2013. The study was approved by 11 research ethics boards reported in the study protocol by Goering, Streiner, Adair, Aubry, Barker et al., (2011). The At Home/Chez Soi trial protocol: a pragmatic, multi-site, randomised controlled trial of a Housing First intervention for homeless individuals with mental illness in five Canadian cities. *BMJ open*. 2011; 1(2): e000323. Available from: doi: 10.1136/bmjopen-2011-000323. This study has been registered with the International Standard Randomised Control Trial Number Register and assigned ISRCTN42520374.

Consent for Publication

Not applicable.

Availability of Data and Materials

The data that support the findings of this study are available from St. Michael's Hospital, Unity Health Toronto but restrictions apply to the availability of these data, which were used under license for the current study, and so are not publicly available. Data are however available from the authors upon reasonable request and with permission of St. Michael's Hospital, Unity Health Toronto.

Competing Interests

The authors declare that they have no competing interests.

Funding

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Authors' Contributions

RS guided the conceptualization of the analysis, selection of variables, contributed to the quantitative and led the qualitative analysis, interpreted the findings, drafted the manuscript, and made substantive edits to the draft; Dr FA contributed to the conceptualization and selection of variables and led the quantitative analysis of the current

study and provided feedback on the manuscript; Dr VS was a site coprincipal investigator and member of the At Home Chez Soi National Research Team and therefore contributed to the design, implementation, analysis, and interpretation of the findings of the original trial, as well as guided the conceptualization of the current study and provided feedback on the manuscript; and all authors approved the final manuscript as submitted and agree to be accountable for all aspects of the work.

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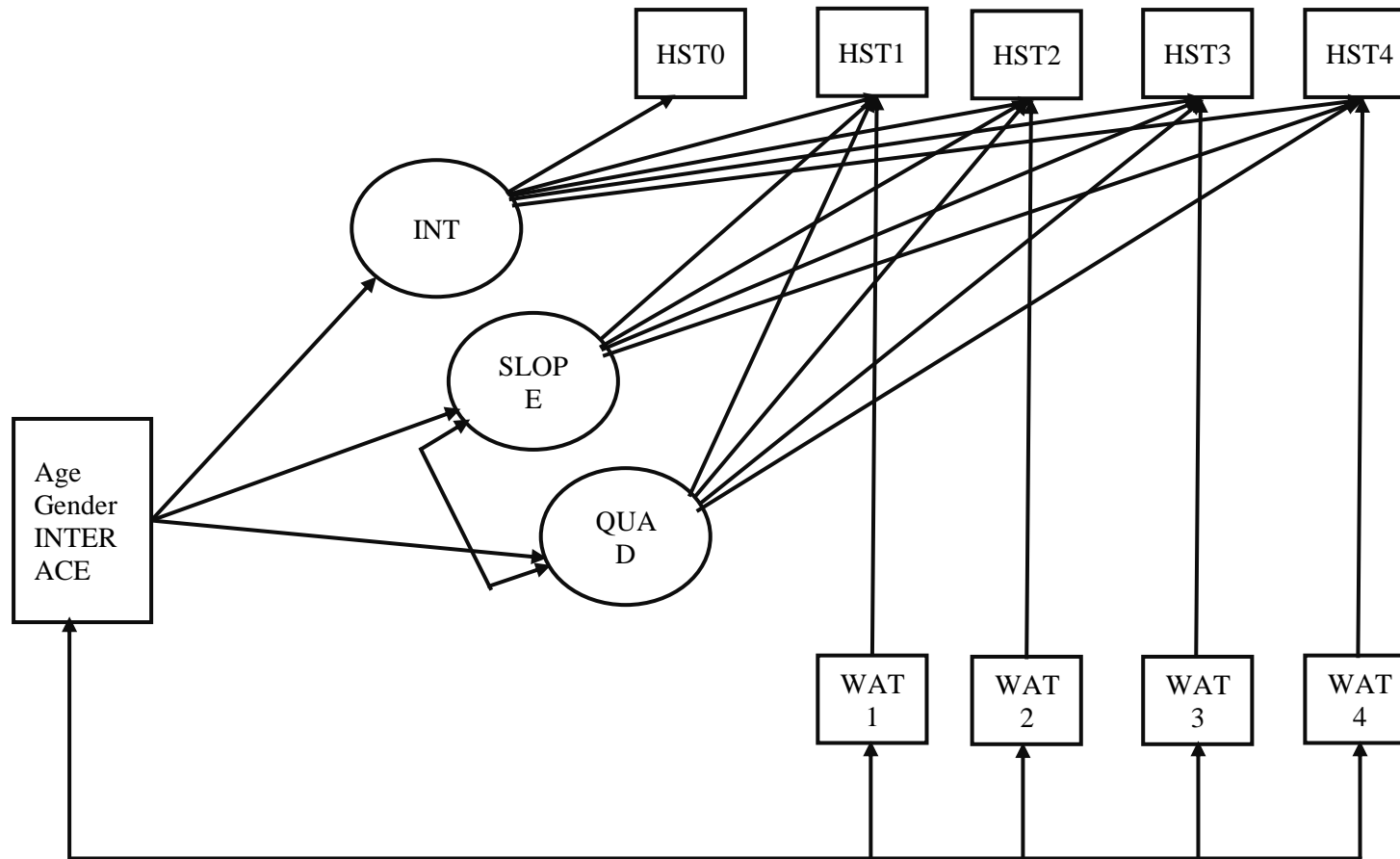
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Table 1
Parameter Estimates for Quadratic LGCM with Time-invariant (TIC) and Time Varying
Covariates (TVC)

	Quadratic LGM-TIC			Quadratic LGM-TIC and TVC		
	<i>Est</i>	<i>S. E</i>	<i>p</i>	<i>Est</i>	<i>S. E</i>	<i>p</i>
Intercept mean	10.613	1.418	.000	3.890	3.055	.203
Slope mean	17.238	2.423	.000	19.060	6.245	.002
Quadratic mean	-2.454	2.423	.000	-2.224	1.739	.201
Intercept variance	35.157	47.684	.461	23.847	57.460	.678
Slope variance	247.302	73.600	.001	401.945	94.972	.000
Quadratic variance	12.626	4.608	.006	25.393	6.184	.000
Intercept with Slope	29.548	42.883	.491	-11.291	52.458	.830
Intercept with Quadratic	-9.657	8.390	.250	0.389	10.674	.971
Slope with Quadratic	-48.948	17.710	.006	-96.970	23.499	.000
Intercept predicted by						
Age	-0.056	0.047	.225	0.022	0.076	.767
Gender	-3.307	1.104	.003	-1.405	1.706	.410
ACE	-0.342	0.173	.048	-0.304	0.275	.268
INTER	2.528	1.092	.021	5.912	2.696	.028
Slope predicted by						
Age	0.204	0.079	.010	0.126	0.124	.308
Gender	-1.212	1.886	.520	2.134	2.788	.444
ACE	0.074	0.297	.802	0.142	0.450	.752
INTER	38.412	1.857	.000	37.599	4.400	.000
Quadratic predicted by						
Age	-0.027	0.020	.173	-0.009	0.032	.777
Gender	0.059	0.471	.901	-0.326	0.726	.654
ACE	-0.032	0.074	.665	-0.030	0.117	.799
INTER	-8.670	0.463	.000	-9.101	1.141	.000
Housing stability predicted by						
T2: Working alliance				0.281	0.044	.000
T3: Working alliance				0.026	0.053	.623
T4: Working alliance				-0.010	0.052	.842
T5: Working alliance				0.025	0.092	.789
	$\chi^2 = 312.424, df = 12 p < .001$; SRMR = .042; RMSEA = .128 [90% CI = 0.116, 0.140]; CFI = .890; TIL = .725			$\chi^2 = 66.789, df = 28 p < .001$; SRMR = .032; RMSEA = .049 [90% CI = 0.034, 0.065]; CFI = .938; TLI = .889		

Note: LGCM-TIC = Latent growth model with time-invariant covariates; LGCM-TIC and TVC = Latent growth model with time-invariant and time varying covariates; HS = Housing stability; WA = Working alliance; INTER = Intervention; ACE = Adverse childhood experiences; χ^2 = Chi-square statistic; df = degrees of freedom; RMSEA = Root Mean Square Error of Approximation; CFI = Comparative Fit Index; TLI = Tucker Lewis Index; SRMR = Standardized Root Mean Square Error of Approximation.

Figure 1.



LGCM with time invariant and time varying covariates.

Note: INTER = Intervention; ACE = Childhood adverse experiences; INT = Intercept; SLOPE = Linear growth factor; QUAD = Quadratic growth factor; HS = Housing stability; WA = Working alliance. Time score fixed to zero not shown. Nonsignificant covariance between Intercept and Slope, and Intercept and Quadratic growth factors not shown.

Table 2

Model Fit Indices for Mixture Model Analysis of Housing Stability

	AIC	BIC	ABIC	Entropy	LMR LR Test <i>p</i> -values	ALMR LR Test <i>p</i> -value	Sample proportion per class	Classificati on accuracy	BLRT <i>p</i> -value
1- Class	97888.464	97939.485	97910.891	-			2141	-	-
2- Class	93144.013	93212.041	93173.916	.944	$p < .001$	$p < .001$	(1304; 61%), (837; 39%)	.979 - .984	$p < .001$
3- Class	91663.649	91748.684	91701.027	.948	$p < .01$	$p < .01$	(1240; 58%), (794; 37%), (107; 5%)	.974 - .979	$p < .001$
4- Class	90635.439	90737.482	90680.293	.951	.466	.475	(1203; 56%), (93; 5%), (778; 36%), (67; 3%)	.972 - .987	$p < .001$

Note. AIC = Akaike information criterion; BIC = Bayesian information criterion; ABIC = Sample-size adjusted BIC; LMR LR = Vuong-Lo-Mendell-Rubin Likelihood Ratio Test; ALMR LR = Lo-Mendell-Rubin Adjusted LRT Test; BLRT = Bootstrap likelihood ratio test

Table 3

Growth Parameters for each Class

Class #	Intercept (SE)	Linear slope (SE)	Quadratic slope (SE)
1	8.645*** (0.548)	62.739*** (0.730)	-12.039*** (0.218)
2	8.645*** (0.548)	-5.554*** (0.779)	1.100*** (0.233)
3	8.645*** (0.548)	30.050*** (3.694)	-5.710*** (1.056)

*** $P < .001$

Figure 2.

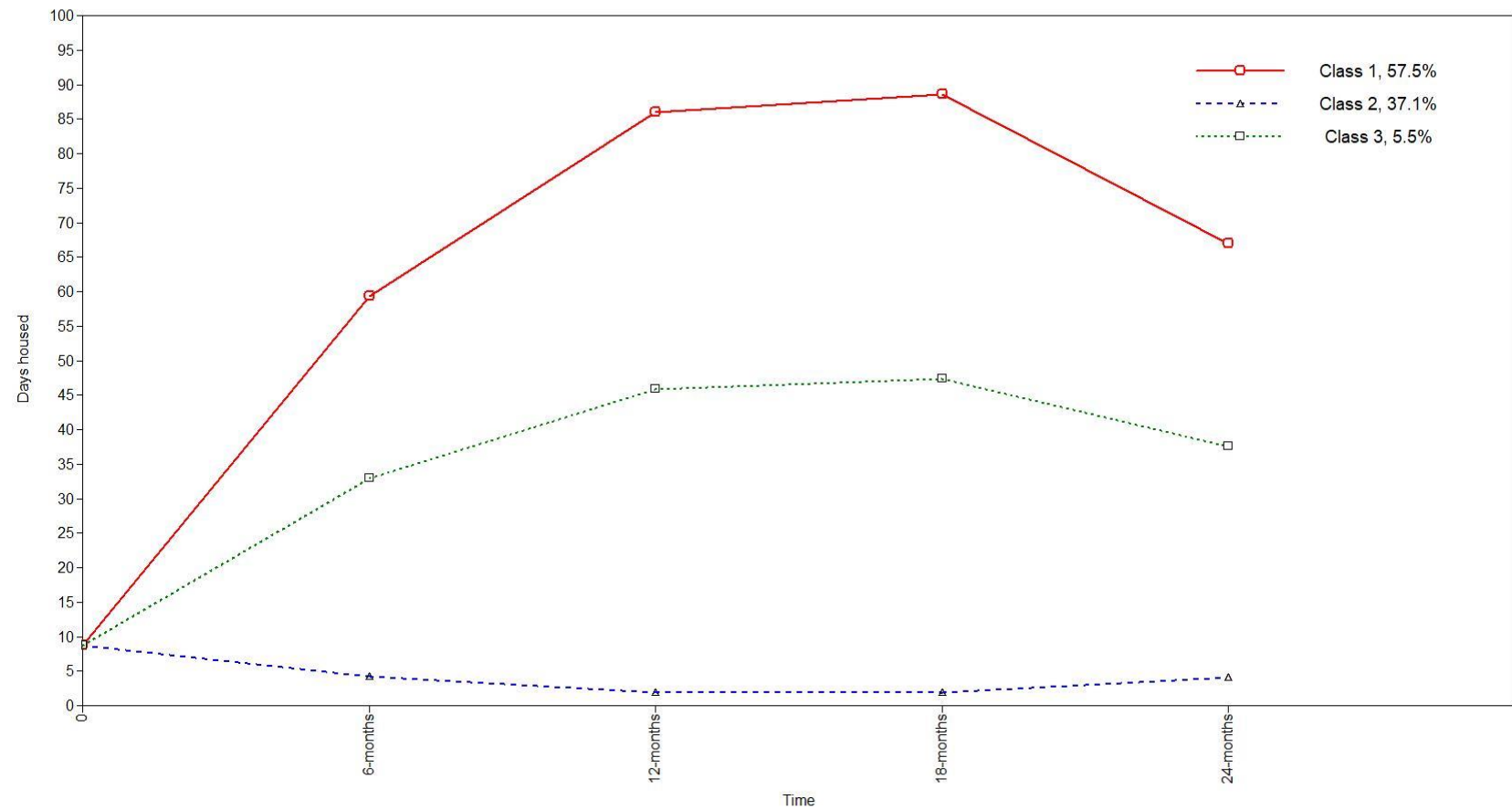


Table 4

Logistic Regression Parameters Predicting Class Membership

	High, sustained, gradual decline	Hardy anytime housed
Reference Class = High, sustained, gradual decline		
Hardly anytime housed		
Age	0.009 (0.020)	-
Gender	0.303 (0.571)	-
Intervention	1.472 (0.766)	-
Childhood adverse experiences	-0.102(0.094)	-
Sharp, sustained, and gradual decline		
Age	0.033** (0.011)	0.024 (0.018)
Gender	-0.002 (0.260)	-0.305 (0.553)
Intervention	2.072*** (0.314)	0.600 (0.767)
Childhood adverse experiences	-0.066 (0.043)	0.036 (0.087)
** $p < .01$; *** $p < .001$		

Table 5
Class Characteristics Identified with Latent Curve Growth Analysis

Variable	Sharp, sustained, gradual decline (n=1240)	Hardly anytime housed (n=794)	High, sustained, gradual decline (n=107)
TAU, n (%)	327 (26.4)	529 (66.6)	50 (46.7)
HF, n (%)	913 (73.6)	265 (33.4)	57 (53.3)
Age (years)	41	39	39
Gender (%)			
Female	35	27	29.9
Male	65	73	70.1
Education (%)			
<High school	53.1	61.6	56.1
Completed high school/ some higher education	19.4	16.9	21.5
Completed trade school/ undergraduate	27.4	21.5	22.4
Age first time homeless	16	27	31
Total time homeless (years)	5.9	6.8	3.9
Childhood trauma (Ace total score)	4.3	4.7	4.2
Diagnosis (MINI %)	51.3	51.4	52.3
Depression	16.1	16.9	14
Mood disorder with psychotic features	35.4	38.8	35.5
Psychotic disorders	22.3	24.1	24.3
Panic disorder	12.8	13.6	15
Manic or hypomanic episode	29.6	28.5	26.2
PTSD			
Baseline mental illness severity (CSI cut-off, %)	75.9	75.1	74.5
Social network (MCAS %)			
Nobody (baseline)	6	5.4	3.7
Nobody (6 months)	2.2	5.1	3.3
Nobody (12 months)	1.6	5.8	1.1
Nobody (18 months)	1.2	5.9	1.1
Nobody (24 months)	0.7	2.4	0.2
Time in prison during study (%)			
6 months	1.5	7	3.7
12 months	1.12	9.6	2.8
18 months	0.31	12.46	3.89
24 months	1.13	10.24	8.03

IMPACT OF RELATIONSHIPS ON HOUSING STABILITY TRAJECTORIES OF
DISADVANTAGED PEOPLE

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Substance problems
(GAIN SPS high use, past
year)

12 months	36.9	46.2	46.7
24 months	28.5	35.5	43

Note: ACE= Adverse Childhood Experiences; MINI= Mini-International Neuropsychiatric Interview; CSI= Colorado Symptom Index; MCAS= Multnomah Community Ability Scale (social network item); Gain-SPS= Global Assessment of Individual Need Substance Problem Scale (only high use reported here).

Discussion

Policy and Practice Implications

The findings of the study highlight two ways of thinking about public policy response to young people in great difficulty which are described in Table 1.

Table 1

Two ways of thinking about public policy response to young people in great difficulty

Programme-orientated thinking	Relationship-orientated thinking
Intervention to reduce risk, treat condition or limit symptoms	Connection to healthy social networks
Focus on risks to good health and development	Focus on emotional reactions to risk, such as shame and guilt
Professional codes of practice and public policy guidance, such as safeguarding procedures, are followed	Personal ethics or norms are used to underpin all social relationships
Administrative pathways are explored	Micro-processes are illustrated
Focus on health and development outcomes	Focus on the young person's sense of worth and ability
Agency of the young person is limited	Agency of the young person is fundamental

The two patterns are not dichotomous. The organisations involved in the study used components from both. Focus on the contrasts, however, help identify new policy understandings and innovation. First, while there has been significant investment in programme selection in the last decades, for example, using “what works” clearinghouses, the findings in this study point towards the value of practitioner selection. For the young people in this study, personal connection was a pre-requisite for ensuring participation in any programme suggesting that the formation of a strong relationship may have effects independent of any intervention or treatment.

Second, workers' understanding of and application of ethics may warrant further exploration. I found the workers in my study to be largely unconcerned with the professional codes and public system guidance that sit at the heart of public policy. They relied much more on continual re-analysis of moral questions rooted in personal moral codes. It is plausible that the latter approach enabled more ethical practice, or at least more analysis of moral dilemmas.

Third, the findings raised questions about the persistent focus on health and development outcomes such as mental health, engagement in education and work, and desistance from crime and misuse of substances. The importance of these outcomes is not questioned. However, without a sense of worth and the ability to contribute to society, the young people in this study seldom contemplated their health, learning, or engagement in work. Sense of worth may be a stepping stone to orthodox outcomes, or it may be an important end product in its own right.

Fourth, the study generated question about the agency of workers and young people. In order to form relationships, the workers in this study were given more time and autonomy than would be afforded to other practitioners. The relationships were not constructed using a manualised approach. Similarly, the workers afforded the young people space to determine how best to resolve challenges in their lives. Progress came at a pace decided by the young people.

Reasons to Doubt the Evidence

There are several limitations to the above findings. First, the sample for the qualitative study was constructed through the author's professional network of organisations that applied varying definitions of severe and multiple disadvantage and was established a priori and not updated at each stage of analysis. Second, the method of interviewing young people in the qualitative study could have been more creative (e.g., using video clips) and the author could have spent more with the young people observing the importance they placed on relationships. A longitudinal approach would have gathered empirical evidence on the development of the relationships and the young people's responses, for example opening up about their personal backgrounds. Third, the qualitative analysis could have benefitted from working with the independent coder for more than a third of the young people's data and from involving an additional coder in the first stage analysis; in terms of the secondary data set from Housing First in Canada, more than 10 transcripts could have been included in the additional qualitative analysis to counteract the limited available information about professional helping relationships. In addition, due to missing data, the analysis did not allow for analysis of the impact of professional helping relationships on young people. Lastly, there are several contextual variables that could have influenced the results. The study did not include an investigation into how system and organisational factors influenced the workers, or how support from additional sources might have complemented the worker-young people relationships in altering their trajectories. The data and analysis indicated how

some characteristics of young people, for example severe mental illness, limit the potential influence of relationships, but there was not sufficient evidence to draw firm conclusions.

Doing Things Differently

A PhD is an opportunity to learn about research. I have learned a lot, and with the benefit of hindsight I might do the work differently. For example, I could have studied the workers' descriptions of young people with whom they had struggled to form relationships. Such an approach could not have involved the young people themselves, but it might have given more information about when and why relationships work.

I continue to feel I could have done more with my training on attachment styles, looking for parallels between the caregiver-child relationships and the worker-client relationships. This exploration would have benefited from close observation of the worker-client relationships, rather than relying only on extensive qualitative interviews.

A PhD is restrictive in terms of time and the ability to find reliable data sources. There is a need to say much more than this study could about the temporal aspects of relationship building: how long relationships take to form, how long it takes to achieve sustained changes in the primary mechanisms, and for how long the effects, such as sense of worth or ability to manage emotional responses to risk, are sustained. The final sub-study indicated significant deterioration in effects within two years for some sub-groups.

Conclusion

The study has added to the existing research literature on the nature, quality and impact of relationships between workers and young people facing severe and multiple disadvantage. It has elucidated the ways in which emotional reactions to risk and being let down by past relationships limit the potential for connection and support. The research has explored the qualities, motivations, and ethics of workers who are considered by their employers and the young people they support to be good at relationship building. It has identified one possible mechanism for explaining how relationships exert influences, stressing the opening up of emotions, the disruption of maladaptive thinking patterns, the fostering of the young person's sense of agency and building their sense of worth and ability. The study has both validated some of these qualitative findings using a quantitative sample and shown the limitations of the relationships with sub-groups.